WORKFLOW CUSTOMIZATION

The EHR should be able to be customized to your work style and practice. Some EHRs position themselves as built for a specialty but don't offer flexibility. Ensure that the EHR lets you customize your workflow with customizable clinical forms and smart templates.

Addiction Services

a) Provide flexibility for cross training employees.

Medical

a) Entering the password only once to enter and exit the system.

b) Ability to edit with one click.

c) Auto population of prior's note date.

d) System able to to direct you to the following sections, automatically.

Compliance

a) Ability to access/ view a form before it is final approved.

Example: A prescriber starts a MPN but does not complete or final approve until the end of the day and staff members are unable to view new information entered on the MPN.

b) Ability to navigate between multiple opened forms without having to close and re-open.

c) Onboarding and training process can assist reducing time and cost along with improving the user experience.

d) Alert scheduling when a consumer is closed/suspended, current authorization in place so that this manual function can be removed and our administrative staff can focus more on customer services and better serve the consumer's needs.

e) EHR record to have separate tabs example for medical where you can review a consumers health record to have separate tabs example for medical progress notes, educational information to be accessed for medical staff.

f) EHR should be able to assist users in developing treatment strategies, suggesting course of treatment, providing educational material for specific diagnosis and medications.

NATIVE SMARTPHONE/TABLET APPLICATIONS

The EHR platform should provide us with web access in addition to a native experience on SmartPhone & Tablets. Native apps provide the full functionality of all of the SmartPhone features such as the built-in camera and microphone as well as the ease-of-use associated with a true native app. We should not have to worry about the loss of functionality caused by having to access your EHR on an Tablet via an internet browser.

Compliance

a) A system that interfaces with our phone system to make appointments, reminders or other information.

Mental Health

a) It should be able to work with tablets and smartphones applications so that signatures can be obtained,

reports can be run and real time information can be viewed on those devices.

REFERRALS, LABS AND INTEGRATED ERX

The EHR should allow you to seamlessly refer, order labs and write prescriptions. Referrals, labs and eRx must be integrated into the EHR to create a paperless solution that easily fits in your workflow. Lab and prescription capabilities must be integrated with best-in-class systems, like LabCorp, Quest, Surescripts and third party labs to provide patients with a plethora of options.

Addiction Services

a) Referral system needs to be simplified from Anasazi system.

Mental Health

a) I would like notifications to come up for any missed labs that the client may have failed to attend. Also for the system to make recommendations on when labs need to be done depending on med RX.

b) EHR should be able to provide notifications such as referrals.

c) It should have the capability to notify staff when errors are being made, so the corrections can be done instantly instead of having to go back and corrected them.

REAL TIME ELIGIBILITY AND MEDICAL BILLING

The EHR should provide you with real time eligibility checks so you know your patients' insurance status in seconds. In addition to Real Time Eligibility checks, a good EHR should allow us to bill straight from your EHR platform, including making billing inputs during the appointment. Ensure that the EHR is integrated with a top tier clearing house, like Emdeon or Trizetto.

Finance

a) ADHOC customized reports, accrual based not cash based, General Ledger Interface, Static Reporting for Accounts, AIR management reporting flexibility.

Mental Health

a) The system should have pop ups as note is being written to ensure that all components needed to bill are there for any service.

b) Very beneficial to know latest insurance status quickly.

a) Being able to access a consumer's financial record through one tab to include copay, insurance information, pending balance, payments, pending reimbursements, reimbursements from insurance company.

b) Would be also beneficial if we can have a report that shows all financials that are expired, updates in the system once financial is completed. Alerts on expired financials.

c) Being able to process services for billing instantaneously.

DATA FLEXIBILITY & PORTABILITY

The solution should provide us with unlimited storage, seamless backup and ultimate data portability. An EHR integrated with a HIPAA-compliant cloud storage system allows doctors to sync and back-up files easily between their EHR and the Cloud. Additionally, doctors can safely share files with colleagues and patients. Finally, an EHR should onboard your existing data while giving you the flexibility to take your data with you if you choose another solution.

Medical

a) Maximized speed.

Finance

a) Make sure there is on-site training.

b) Able to set up specialized suspense codes based on programs requirements, allow alerts for different assessments and treatment plans.

Mental Health

a) CW tab to have alerts when an assessment will be expiring, On the CW tab to show LOC authorized, assessment dates, recovery plan date.

b) Enable the access to submitting a billable progress note when there is being entered more than 48 hours of services.

c) Link referrals from EHR.

d) Calculate consumer monthly services to reflect UMUR guidelines this would allow us to see how much time we are serving a consumer on average per month.

e) Able to link our website to our system.

PATIENT PORTAL

The EHR should provide us with a patient-friendly portal. The EHR should provide patients with a one-stop portal where they can manage essential aspects of their medical experience. This includes the ability to book appointments online, access their medical records, securely message their physician and pay their bills.

Mental Health

a) Clients should also be able to review their address, phone, insurance and leave comments if they have to make changes.

b) Consumers that are on rep-payee services, CW would have access to see activity on account and balances financials.

c) On the portal consumers would be also have access to their recovery plan and assessment.

Compliance

a) Envisioned for veterans to have access to their records, appointments and calendar of events. I had initially though it could be a good idea to incorporate the phone application and the virtual one-stop veterans to the EHR system. However, Noreen asked me last Friday for the amount allocated to the virtual one-stop as her division is already working on that item.

PATIENT CHECK-IN

The EHR should provide you with a clipboard free way to check-in your patients. An EHR should provide us with a comprehensive check-in solution; the solution should allow our staff to provide our patients with a seamless check-in

experience. Additionally, all input data should easily sync with the patient's EHR record upon approval from the front-desk staff.

Addiction Services
a) For the possibility that EHN will have a computerize check in on the front desk, where client will center their own information I the computer as well as the next available appointment.

Compliance
b) The ability of a client to be able to sign in at the time of arrival.

Mental Health
c) Check in consumers for all services and not only for providers. It van include nursing, labs, CW and Crisis. This would allow us to track consumer's visits to the clinic or EHN departments and what services they access with frequency.

ADVANCED TOOLS FOR EFFICIENCY

An EHR should offer time saving tools like medical speech to text, free draw tools, billing and appointment profiles, and macro buttons. Macros and profiles should be easy to build and use across your EHR. Medical speech-to-text should allow you to take clinical notes by voice and adapt to any accent or speech style. In addition, free draw tools enable us to markup diagnostic images directly on the iPad.

Addiction Services
a) Easy and friendly system.

Medical
a) Ability to dictate in to the system with resulting transcriptions.

Mental Health
a) We need advance technology to increase efficiency and raise productivity, expand flexibility, improve user engagement, and decrease costs. The EHR should give us the ability to advance in the market's long term needs. We need to break the cycle of dependency, reliance, and residual revenue generated from short-term solutions.

b) There are growing markets for integrated and value based care that will require new investment and pull for innovative business partnerships. With our never ending need to expand and transform service markets, we need an EHR that not only offers configurable workflows, but also flexible enough to adapt to our ever changing needs. This new process involves multi-disciplinary team participation across specialties working in harmony to achieve common objectives and owning responsibility for shared metrics.

c) A system that is able to batch employee timesheets to notes entered and generated a quick, accurate productivity report (breaking it down by service codes, etc.). With the MH Nurse Productivity report I am completing now, I could see how a system that would allow that would be quicker.

d) We are seeing barriers with the current system and E/M coding. Dr. Thornburg stated that the system he currently uses will add up points for him on the note and generates the correct E/M billing code to use. This might be something to explore since the E/M coding review that we completed shows that the doctors are having a difficult time billing correctly.

e) How many providers have we lost as a result of inadequate, inefficient, and frustrating old technology dependencies? A better EHR experience for end-users can increase efficiency, productivity and performance, while also enabling data extraction, transmission, reporting, and real-time analytics to improve clinical and business decision-making processes. Providers need easy accessibility to tools that reduce time consuming, lengthy processes. Particularly helpful are tools such as the insurance formulary domains that are built in newer model EHRs.

f) The EHR links the client's insurance company with the medication that is being prescribed and automatically informs the provider that the medication is out of the formulary and therefore "uncovered".

g) The system allows the provider to complete a Prior Authorization for the insurance company to provide clinical justification for the use of a medication.

h) This eliminates the old, time consuming process of having to interchange faxes of information to get a medication approved.

i) User friendly easy to access EHR record where all documents in the system that are scanned in are legible to read, organized by departments.

CLINIC PATIENT EDUCATION

Provide patients with best-in-class medical information related to their visit and after-care. Provide your patients with credible educational documents and videos. Additionally, we can give our patients mobile, ongoing mobile and web access to education material.

API & THIRD PARTY INTEGRATIONS

Ensure that the EHR enables you to integrate with other health applications or even build directly on their API. An open API means out EHR cares about integrating the most innovative solutions in healthcare into their platform. If we want even more customization, we should be able to leverage the API to build to your specifications.

Mental Health

a) Link community resources so that they may have easier access.

MEANINGFUL USE

Ensure that our EHR solution is Meaningful Use Stage 1 and 2 Certified, at the very least. Selecting an EHR that is certified for Meaningful Use will allow us to qualify for the Meaningful Use Incentive program. The new HER must allow us to combine our data to attest for the current reporting period.

Mental Health

a) User experience has taken a back seat to obvious priorities such as state reporting, compliance, and Meaningful Use. User experience is highly undervalued but plays a huge role in provider retention.

BACKOFFICE (IT)

The EHR should provide effective tools to allow centers to administer all backoffice functions of the system. It should include a job scheduler to allow for automation and eliminate manual work. The EHR should provide system monitoring tools and effective visibility of system state, a consistent look and feel, minimalist design (excessive number of "views"), informative feedback (smart alerts, good error messages, improved self-help features – "help"), reversible actions (to recover from user errors), user customizability (to allow users to customize their personal

view of screens). It should also be programmed in a way that it minimizes memory load and be built for speed and efficiency.

a) Upgrades (promotions) need to be streamlined. Too many manual steps. Better Quality assurance. Automate installation of local clients. Improve documentation for promotions and manuals – provide greater detail.
b) System is too slow.
   o Assessments take up to 1 minute to open.
   o Reports take too long to run. Streamline SQL queries for reporting. Instead of running a curser query maybe use stored procedures. Too many tables not being used create confusion for DBA and inefficiency during operations.
c) Do away with the Anasazi client. Offer a browser based interface.
d) Offer a better option document imaging management. Going 'paperless' will never happen with the current solution, or lack thereof.
e) Option schedule to purge older medical records (in compliance with HIPAA). Purge option should include a way to archive first, then purge, so we keep an electronic record of all purging activities.
f) IMPROVE SUPPORT – if there is an on-call team, they need to call back, or don't offer this service at all. Client representative should be available at all times, including weekend and holidays and should answer or call back in a timely manner. Possibly, create a team for each center made up of a developer, engineer and primary support personnel. This creates rapport and familiarity with the center and Cerner's support team. Improves customer satisfaction and response times.
g) Security issue: improve authentication to SQL server. Use active directory or local users to know who is loggin in to the database. Currently all users use a generic username to make the connection to the database.
h) Users experience a "system lockup" where the screen goes white and theres nothing to do but close the session and reopen.