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MGMA: Implementing EMR was a challenge, but our attitude helped us succeed

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When Southeast Texas Medical Association LLP (SETMA) began in 1995, we had no uniformity in creating, filing or storing medical records. Some physicians dictated patient records, others handwrote them. Some organized records alphabetically, others used a numeric system. Our medical record-keeping illustrated all the problems facing health care in America.

In 1998, we purchased an electronic medical record (EMR) system and the fun began. It was soon obvious that this was going to be harder than we thought.

We were told that the best way to implement the EMR was to limit the schedule of patients and begin with the last patient of the day. We didn't decrease the schedule and we began with the first patient of the day. The new technology and our unfamiliarity with the templates slowed us considerably. We got so far behind that first morning that we reverted to dictating our notes.

We finished the afternoon session two hours late. Four days later we saw every patient in the clinic using the EMR. Over two weeks, we achieved the same efficiency level we'd had pre-EMR, but with a growing ability to bring more information and functionality to each patient encounter.

Two simultaneous events define our success with EMR. We began developing EMR functionality to enhance the quality of patient care, increase patient satisfaction and expand providers' knowledge and skills. In spring 1999, we adopted electronic patient management – and the investment of time and money was suddenly worthwhile. The EMR now allowed:

- Capturing and processing data focused on disease;
- Auditing efforts to change those disease processes;
- Measuring the effectiveness of those efforts over time; and

- Evaluating the quality of patient care at the point of care.

The second event – in May 1999 – set the tone for the next six years of EMR implementation. In a moment of frustration with the system, which at this point was cumbersome to use and yielded little more than an acceptable record of a patient encounter, one partner said, "We haven't even begun to crawl yet." SETMA's CEO said, "Yes, and if a year from now we're still operating on this level, I'll join you in your complaint. But I'm celebrating the fact that we're doing more than ever before."

A celebratory attitude has given SETMA the resolve to face hard times. The vision of electronic patient management has given us direction. We are on a pilgrimage to excellence that will never end.

This article was adapted from "Fearlessly facing the future – Case study: A Texas practice's implementation of EMR and fully integrated back-office system" in the February 2006 MGMA Connexion.