



Fearless EMR Selection... How to Decide?

The following article is from Dr. Robert Lamberts, MD -

So you've finally decided to implement an electronic medical record. You're understandably nervous. It's frightening to spend so much money and even scarier to consider the potential disruption to your income that may occur. How do you decide which system to buy?



Narrow the focus of your search using some easily accessed online resources:

1. Buy a product that is certified by **Certification Commission for Health Information Technology**. CCHIT is a government task force established to set standards for EMR products. Its goal is to allow systems to communicate with each other and enable more interfaces in the future.
2. The American Academy of Family Physicians' **Center for Health Information Technology** and the **American College of Physicians** both have tools to help member physicians decide on an EMR. Your own specialty society may too.
3. **DOQ-IT**, a federal program administered through state quality improvement organizations, helps primary-care practices choose and adopt an EMR.
4. Several professional IT organizations have programs to improve EMR adoption, including **HIMSS** and **TEPR**.

Next, compare products in terms of the following:

5. **Implementation process** -- I can't emphasize enough that this is the most important factor predicting success or failure of EMR adoption. It is essential to know how the vendor plans to move your office from paper to electronic records.
6. **Cost** -- You know the cliché. You get what you pay for. Our office ultimately decided on a fairly pricey system; it has become quite profitable. In general, the cheaper systems offer less functionality. Include at least one higher-cost system in your search for comparison's sake so you can see what you'd be missing.
7. **Disease Management** -- With performance-based payment emerging as a trend, select a system that's smart about maximizing quality. EMR is more than a note-generating tool; its database of patient records can -- and should -- be used to maximize quality and eventual reimbursement.
8. **E-Prescribing** -- this is a "must have" part of any system. Why? Because starting in 2009, all physicians who e-prescribe will be paid more by Medicare.
9. **Online communication tools** -- Does the system allow you to communicate results to your patients via e-mail? Does it allow for "e-visits?" Insurance companies are paying for these more and more.
10. **Good future** -- We purchased our EMR in 1996. Most of the products sold at this time are no longer in existence. Check out a vendor to make sure it is moving forward.

Finally, make a site visit. **Never buy a system that you have not seen functioning well in person at an office that is comparable to yours.** If the EMR vendor can't show you an actual practice using its product, then don't buy it. Salespeople can make any product look good; only by visiting another medical practice will you see both the good and the not-so-good.

Editors Note: Dr. Lambert utilizes Centricity® EMR which is part of a fully integrated PM and EMR software suite which meets the criteria mentioned in the article. For a demonstration or more information on adding Centricity® EMR call 888-250-3056 or email insidesales@sbsmem.com and a sales representative will be in touch with you.

Robert Lamberts, MD, is a board-certified primary care physician with Evans Medical Group in Evans, Georgia. He serves on multiple committees at several national organizations for the promotion of computerized health records, for which he is a recognized national speaker. He also maintains a popular, more-or-less healthcare-focused blog, www.distractable.org. Dr. Lamberts can be reached at rlamberts@EvansMedicalGroup.com.

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Obama adds health IT to economic stimulus package

President-elect Barack Obama said health information technology will be included in an economic recovery plan that is being worked out with members of Congress.

In his Dec. 6 radio address, Obama said modernizing U.S. hospitals would be part of a major effort to finance an upgrade of the broadband infrastructure of the U.S.

"We will make sure that every doctor's office and hospital in this country is using cutting edge technology and electronic medical records so that we can cut red tape, prevent medical mistakes, and help save billions of dollars each year," Obama said.

To read the full article, visit www.govhealthit.com.

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TIME TO UPGRADE YOUR SERVER

First Quarter, 2009

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MEDICARE NEWS...



How long does it take to run reports at month's end? One of our customers purchased a new server and then called up at month's end wanting to send it back. "I clicked on my reports and nothing happened. It normally takes 20 minutes for these to run - something is wrong with our new server." When asked to look, she found her report just where it was supposed to be; but instead of 20 minutes, it took less than 2 seconds.

It's a cliché, but 'technology is changing fast' and - to add an additional cliché - 'time is money.' If your server is *more than 2 years old*, we believe you should take a serious look at upgrading this important device. Most servers two years old are running on older, single core microprocessors and limited amounts of RAM memory. Based on the number of users you have, these older machines can become bogged down - but it happens so gradually that most people do not realize it.

The **benefits** of a new server can include: **quicker response in Centricity® screens, faster report generation, documents being printed more quickly, and other advantages.**

In addition, a new server **can allow you to upgrade from CPO-04 to CPS** - Centricity® Practice Solution - with its improvements in operation. A new server can also be designed to prepare you to **add Centricity® EMR** when the time is right. With new reimbursement rates for e-Prescribing, more practices are considering adding EMR to gain these higher reimbursement rates. We have found that many practices considering adding EMR do not have the server 'horsepower' to handle the addition of EMR.

Another consideration is to **replace your current PCs with "thin clients"**; basically a Windows 'appliance' that, when combined with Terminal Services (basically accessing Centricity® as a terminal to the server), provides an inexpensive tool to access Centricity®. In addition, using Terminal Services and Windows 'appliances' makes upgrading Centricity® much easier - only the server needs to be updated, not the individual PCs.

Strategic Business Systems, Inc. can provide you an estimate on the cost of a new server or we can provide specifications to your IT provider. Email insidesales@sbsmem.com for more information or call (888) 250-3056.

Medicare Outlines e-Rx Incentive

The Medicare program in 2009 will provide physicians with a financial incentive to use e-prescribing in hopes of boosting the efficiency and safety of care. Physicians and other clinicians who adopt and use qualified e-prescribing systems to transmit prescriptions to pharmacies may earn an incentive payment of 2% of their total Medicare allowed charges during 2009.

This incentive is in addition to a 2% incentive payment to those who successfully report measures under the Physician Quality Reporting Initiative. In addition, the Centers for Medicare & Medicaid Services will implement a 1.1% Medicare fee schedule hike in 2009 as required by the Medicare Improvements for Patients and Providers Act of 2008. Under the Medicare Improvements for Patients and Provider Act of 2008, Medicare's e-prescribing incentive payments will be 2% in 2009 and 2010; 1% in 2011 and 2012 and 0.5% in 2013. Beginning in 2012, Medicare payments to physicians not e-prescribing would be reduced by 1%, then 1.5% in 2013 and 2% in subsequent years.

Medicare Rule Includes Fax Exemption



The Centers for Medicare and Medicaid Services has published a final rule setting the Medicare Part B physician fee schedule for 2009. The rule will permit until 2012 the use of computer-generated faxes of prescriptions for Medicare patients to pharmacies, reversing an earlier CMS decision to prohibit the practice.

This means providers can continue faxing prescriptions if their e-prescribing systems do not actually send an electronic prescription or refill request to a pharmacy, but generate a computerized fax. CMS' earlier effort to prohibit the faxes was designed to push vendors to build, and physicians to use, "true" e-prescribing systems. But public comments convinced federal officials that the industry was not ready for the transition.

More information on these and other articles regarding Medicare is available at www.cms.hhs.gov.

WANT TO PROPEL YOUR PRACTICE? *Here's How!*

Have you thought about upgrading your system or adding **EMR** to your practice? What causes you to hesitate? Most often, the issues are financial. Is there a way to overcome these?

As the economy struggles, all each of us has control over is what we do every day. When the economy performs poorly, the same tired techniques we have become comfortable with will always bring the same disappointing results.

In order to step up your success **right now**, we must work **smarter!** Here are some ideas:

1. During times of economic instability, it is very important to conserve cash reserves and working capital. Considering a new system NOW can help you work *smarter*, not harder. Adding **EMR** will allow you to streamline your record-keeping and become more efficient. And financing your new system NOW makes even more sense. You can finance **100%** of the cost along with all the installation, training, support and maintenance at very reasonable rates.
2. You may be able to take advantage of the significant tax deduction under Section 179; check with your tax professional.
3. In most cases, you can actually make a profit utilizing **100% financing** especially if you have been outsourcing your billing and records management. A typical example would show that paying cash for this system would actually cost more over the same period of time than it would cost to finance it.

Allow us to give you an estimate on upgrading to **Centricity® EMR** complete with cost-effective financing options included.

Richard Scown currently serves as President and Chief Executive Officer of RS Capital Corporation, a commercial finance company specializing in providing financing solutions for the medical industry since 1999. Previously, he held senior financial executive positions in the commercial banking industry for over 27 years. He received his Bachelor's degree in accounting and finance from Boise State



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- Customer newsletter, recall notices & other inserts available
- Send detailed or balance forward statements

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- Do nothing – We retrieve statements on your schedule
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- Review available reports to see who is getting a statement
- Simply reply to confirm or reject/reschedule the statement run

Enroll now with SBS Statements; Contact Sales at (888) 250-3056.

STATEMENT

MEMPHIS RADIOLOGICAL ASSOCIATION
DRS. WILSON & EDWARDS
1234 SUMMER OAKS DRIVE
MEMPHIS, TENNESSEE 38111

FOR BILLING INQUIRIES, PLEASE CALL: 888-555-6666
PAGE 1 OF 1

BILL TO: JANE SNOW
456 TRACEWAY

MEMPHIS GROUP
1234 SUMMER OAKS DRIVE
MEMPHIS, TN 38111

STATEMENT DATE: 04/18/2006
ACCOUNT #: 13604
PAY THIS AMOUNT: \$41.65

MAKE CHECK PAYABLE AND REMIT TO: MEMPHIS GROUP

STATEMENT

Memphis Group
1234 Summer Oaks Drive
Memphis, TN 38111

Office Hours: 8:00am - 5:00pm Mon-Fri
Phone: 901/221-2334 Toll Free: 888/221-2334

JANE SNOW 13604
456 TRACEWAY
MEMPHIS, TN 38177

MEMPHIS GROUP
1234 Summer Oaks Drive
Memphis, TN 38111

DATE: 04/18/2006
ACCOUNT #: 13604
PAY THIS AMOUNT: \$41.65

MAKE CHECK PAYABLE & REMIT TO: MEMPHIS GROUP

DATE	DESCRIPTION OF SERVICE	INSURANCE	PATIENT
Jane Dorothy Snow	001168 John Sheppard, MD	\$15.00	\$0.00
07/25/05	CBC with differential automated	\$45.00	\$0.00
07/25/05	Expanded Office Visit Established Patient	\$27.00	\$0.00
07/25/05	ROCEPHIN INJECTION PER 250 MG	\$3.70	\$0.00
09/12/05	Disallowed Adjustment from ACORDIA NATIONAL	\$41.65	\$0.00
09/12/05	Payment from ACORDIA NATIONAL	\$41.65	\$41.65
09/12/05	Transfer from Insurance	\$0.00	\$41.65
	This amount reflects your copay payment due	Visit Balance:	\$0.00 \$41.65
TOTAL DUE FROM INSURANCE/PATIENT			

-----Account Aging-----				-----Current-----			
Aging Current	30 Days	60 Days	90 Days	120 Days	Patient	Insurance	Account Balance
\$0.00	\$0.00	\$0.00	\$0.00	\$31.00	\$31.00	\$0.00	\$31.00
							\$31.00

Date of Statement: 10/15/2005
Account: 13604
Jane Snow

Memphis Group
1234 Summer Oaks Drive
Memphis, TN 38111
Phone: 901/221-2334 Toll Free: 888/221-2334

Announcing...

The 2009 Centricity® Practice Webinar Schedule

We invite you to participate in one of the many webinar offerings in 2009. These complimentary webinars are interactive sessions providing you with an overview and demonstration of Centricity® Practice offerings.

JANUARY 2009 WEBINARS

"ePrescribe Webinar"

January 06, 2009 | 3:00-3:30 PM CST

"Electronic Medical Records Overview"

January 09, 2009 | 12:00-12:30 PM CST

"Centricity® Analytics"

January 14, 2009 | 3:00-3:30 PM CST

FEBRUARY 2009 WEBINARS

"ePrescribe Webinar"

February 06, 2009 | 3:00-3:30 PM CST

"Electronic Medical Records Overview"

February 12, 2009 | 4:00-4:30 PM CST

"Centricity® Analytics"

February 17, 2009 | 12:00-12:30 PM CST

MARCH 2009 WEBINARS

"Centricity® Analytics"

March 12, 2009 | 2:00-2:30 PM CST

"ePrescribe Webinar"

March 13, 2009 | 4:00-4:30 PM CST

"Electronic Medical Records Overview"

March 13, 2009 | 3:00-3:30 PM CST

Contact our Sales Department at (888) 250-3056.

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TRAINING	888-270-7143	training@sbsmem.com
BILLING SERVICES	800-718-2592	billing@strategicphysician.com
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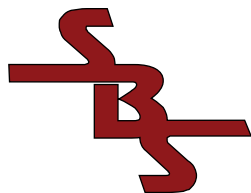
Strategic Business Systems, Inc. is now accepting credit cards (Visa and Mastercard only) with no fee for purchases under \$2,500; there is a 3.5% fee for American Express charges.

Payments over \$2,500 are charged a 5% fee. Contact our office at (888) 250-3056 for ??s.



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