The Complementary Role of Charge Capture in an Electronic Medical Record (EMR) Implementation

Healthcare Facilities Can Achieve a Rapid, Tangible ROI from a Best-of-Breed Charge Capture Solution in Weeks

Many healthcare facilities are embarking on electronic medical record (EMR) initiatives as part of an overall strategic agenda. From selection through deployment, EMR projects are very complex, and the paths and milestones to completion can vary from institution to institution. In fact, it’s not unusual for a full EMR implementation to take three years or more – and demonstrable ROI may take even longer.

The breadth of functionality promised by many EMR vendors leaves group practice managers concerned about overlapping capabilities. However, the core competency of most EMRs is in the area of documentation workflow. With budget dollars under pressure and ROI from EMR implementations often years away, organizations are looking for best-of-breed capabilities that can deliver tangible ROI in months, rather than years. Unfortunately, the expansive nature of EMR implementations causes many healthcare facilities to delay or forego such pragmatic software investments.

One such application is electronic charge capture (ECC), which has been proven to achieve meaningful benefits and demonstrable ROI in weeks, not years. A robust ECC solution designed to optimize inpatient and outpatient charge capture enables clinicians to quickly and easily record charges for services they deliver – at the point of care, in the office, or anywhere in between – on handheld devices like smartphones and Apple iPads, or through a web portal accessed via a desktop or laptop computer. The optimal ECC solution lets clinicians view and select from personalized quick pick lists, existing diagnoses lists, easily search CPT-4 and ICD-9 codes, and provides automated workflow for submitting charges into the healthcare facility billing system. It’s also important for the ECC to offer direct integration to existing inpatient and outpatient billing systems.

An intelligently designed ECC solution is an ideal starting point and complement to EMR initiatives for several reasons:

• Proven ROI
• Rapid time-to-value
• A single workflow for physicians and billers/coders
• Benefits of a best-of-breed solution
• Anywhere– anytime freedom for physicians to manage billing tasks when it is most convenient for them
Proven ROI with Rapid Time-to-Value

The ideal ECC solution requires minimal implementation resources and can be fully installed in three months or less. That translates into an accelerated payback cycle that provides a persuasive “early win” ROI during the long path to EMR implementation.

The financial benefits from improving the charge capture process stem from a variety of sources – all tangible and measurable. ROI impact studies with conservative estimates project a three-year return for 100 full time ECC users (used in both inpatient and outpatient environments) to be in excess of $5 million. This is based on average annual collections of $250,000 per physician, less than 33 percent reduction in days of lag time, and includes all costs associated with software license, hardware purchase, deploying and maintaining the system over a three-year period.

Given these estimates, delaying or foregoing a charge capture project can represent a sizeable opportunity cost. The optimal three-month ECC implementation ensures immediate revenue improvements and achieves break-even in one to two quarters. By generating significant cash return – years before an EMR could deliver a measurable ROI – ECC becomes a way to fund other aspects of a fuller EMR implementation.

A Single Workflow for Physicians and Billers/Coders

Successful physician adoption depends on ease of use, accessibility and consistency across care settings. If physicians have to adopt different processes and tools to accomplish their charge capture tasks, they will be less compliant, which can directly impact revenue. Most EMR vendors have roots in either the inpatient or outpatient environments. Some have attempted to augment their original application either through acquisition or secondary applications to gain market share. For a small group of vendors their true core competency still lies in either inpatient or outpatient workflow.

EMR vendors that bridge both care settings typically promise great benefits to client organizations through tighter clinical data integration. However, many of these vendors utilize different user interfaces and tools for the inpatient and outpatient settings, especially in the areas of documentation and charge capture.

If employed physicians also practice at locations not served by the institution’s chosen EMR, as is often the case, then there is little or no support for a consistent and easy-to-use charge capture solution for the care they provide to patients in those settings. Most EMR vendors cannot accept ADT feeds from community healthcare facilities outside the health system to process inpatient charges captured. They also do not support a manual registration alternative for those patients. This forces physicians to utilize different processes and tools for capturing their charges depending on where patients are admitted – outside healthcare facilities, nursing homes, etc. Historically using multiple charge capture systems leads to frustration, lack of adoption, and suboptimal charge capture.

In the above scenario, where physicians treat patients both in and out of the health system, billers and coders also are forced to utilize different processes. Decentralization and inconsistency of information access leads to inefficiencies, missed charges, increased lag, and overall poor revenue optimization. The optimal ECC solution provides one unified billing process for physicians and back-end billers and coders across inpatient and outpatient environments, as well as across care settings and healthcare facility/health system ownership.
Best-of-Breed Benefits:
Focused charge capture solutions provide an unparalleled level of detailed functionality to drive top line revenue

For any healthcare institution, the value proposition of a monolithic EMR solution is attractive. Unfortunately, when it comes to achieving the proven hard-dollar return of an effective charge capture solution, EMR systems can come up short. That’s because vendors of all-in-one EMR systems typically treat charge capture as a byproduct of clinical documentation rather than as a core function, despite its critical importance. These vendors also lack specific charge capture workflow expertise; instead, they offer a workflow that follows documentation of a patient encounter.

Additionally, few EMR vendors offer charge capture systems capable of managing E&M coding complexities and correcting coding as the physician enters the codes. There is no context or logic associated with the workflow to automatically append the correct modifier or intelligently require additional information at the time of entry.

Choosing a best-of-breed charge capture solution offers capability advantages over EMR charge capture to optimize physician adoption and revenue:

• **Code edits at the time of entry.** Lack of code edits in EMR charge capture solutions hinder charge lag improvements by requiring multiple physician callbacks and creating back-end inefficiencies. Rework is often required to correct simple details that otherwise would have been captured at the time of entry. Examples include workers’ comp questions (injury date/type), referring physician, LMP, time with patient, etc. This requires additional information gathering by billing and coders, which delays charge entry and distracts them from accounts receivable, denials and high-value tasks.

• **Missing charge reconciliation in the inpatient environment.** While it’s easy for administration to reconcile ambulatory appointment schedules with charges, it is significantly more challenging to find missing charges in the inpatient environment – where higher dollar activities occur. Capturing missing consults, ER visits, and procedures alone can drive the ROI payback.

• **Grouped/macro codes.** Offering macros can insure that physicians capture all secondary and tertiary procedures as well as required supporting diagnoses. Again, these are frequently overlooked because a physician may or may not remember to proactively seek out these additional codes.

• **PQRI capabilities.** Non-existent in most EMRs, PQRI can be supported easily within the charge capture process by auto-prompting physicians with questions about care and outcomes — for only those patients meeting the criteria. Firing these edits only when needed, the optimal ECC solution can save physicians time and increase revenue. The average ROI for PQRI reporting is approximately $1,700 per year per user, a figure expected to increase over time.

• **Reporting and benchmarks.** A robust ECC solution should support detailed analysis of the charge data, providing both ad-hoc and standard reporting with a set of preconfigured dashboards for executive overviews.
Anywhere/Anytime Freedom of Access:
Offer physicians the right tool at the right time

Physicians have a highly mobile daily workflow, which requires both a sophisticated mobile and web solution. As physicians round through the inpatient environment or nursing home, a mobile solution allows them to capture the charges at the point of service to reduce lag and optimize accuracy. In addition, in these environments, it’s often difficult to find and access a PC due to the limited terminals and competing needs of care team members. Most EMR vendors do not offer mobile charge capture functionality.

In the outpatient environment, where there typically is ready access to a desktop computer, a Web portal is preferred for charge capture. An optimal ECC solution supports both mobile and Web-based charge entry with the same workflow, user interface, pick lists, etc. Additionally, it would integrate to an EMR or vice versa to allow physicians one-click access from their EMR to their charge capture entry screens.

Conclusion

The intelligently designed ECC solution complements an organization’s EMR with best-of-breed functionality that can be implemented and exploited with minimal resources. Healthcare facilities can capitalize on specialized charge capture capability faster with less upfront setup, ongoing maintenance, and charge rework than EMR documentation-based charge capture systems require. By adopting charge capture immediately, healthcare facilities derive more value sooner than would be possible in multi-year EMR implementations. Resources required for a charge capture project, which typically involves relatively few IT staff hours, do not normally overlap those needed for the EMR deployment. This allows a charge capture deployment to easily occur simultaneously to the EMR implementation without disruption to timelines and milestones.

About PatientKeeper: PatientKeeper®, Inc., the leading provider of physician health information systems, enables physicians and hospitals to focus on their patients, not technology, by providing highly intuitive software that streamlines physician workflow to improve productivity and patient care. PatientKeeper's CPOE, physician documentation, HIE and other applications run on desktop and laptop computers and virtually all handheld devices and tablets. PatientKeeper integrates easily with hospitals' existing IT infrastructure to create the most cost-effective solution for driving physician Meaningful Use.