

Doctor's Digest PODCAST: Primary Care and the Medical Home "Technology and the Medical Home"

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Hello and welcome to this new series of podcasts brought to you by the publishers of *Doctor's Digest*, bridging the gap between the business of medicine and the practice of medicine, with single-topic manuals that provide practical solutions from the experts. Support for this program comes from McNeil Pediatrics, division of Ortho-McNeil-Janssen Pharmaceuticals, Inc.

If your practice is converting to the medical home model, you will benefit from using computers extensively for the two vital components of the medical home: information and communication. A starting point would be having electronic medical records, or EMRs. In addition, electronic tools like e-mail and text messaging can supplement or even replace phone calls, and in the near future your patients are likely to expect to be able to access their medical information over the Internet. However, if you don't yet have an EMR system, you're far from alone: according to a study published last year in *The New England Journal of Medicine*, only four percent of physicians in this country have a fully functional EMR at this point, and another 13 percent have a basic system. But those numbers are changing fast: It is expected that 55% of all physician offices will be fully computerized by the year 2014, thanks largely to Medicare/Medicaid stimulus money.

If you've waited until now to invest in an EMR, that may actually turn out to have been a smart move because most earlier EMRs wouldn't have been able to do the job that the medical home requires. While the earliest EMRs were designed primarily to help with coding and billing issues, the newer systems will focus on managing patients.

One major new convenience of EMR technology is that your practice will now be able to mine the information stored in your system to analyze your specific patient population and track your performance. Once you've entered the raw data, filling out boxes and clicking buttons rather than typing or dictating notes, the system can easily find the data it needs to build a database and produce reports. For example, how many of your patients are hypertensive? Which ones suffer from respiratory diseases? Setting up disease registries will be one of the most basic and useful medical home functions. As Dr. Barbara Morris, chief medical officer for Community Care Physicians in Latham, New York, says, "It's impossible to have a medical home without electronic support if you have a large patient population. An overloaded primary care physician taking care of the urgencies of the day doesn't have a good, reliable way to know what types of patients he or she has, and which ones have specific issues in common that constitute a disease management population." Stepping back from day-to-day issues and gaining an overview of your patient population can lead to more efficient healthcare.

For a true medical home, getting an EMR is only the first step. The next one is figuring out how to communicate with specialists, hospitals, pharmacies, and especially your patients themselves. Interoperability—the ability for two computers to automatically swap data without a lot of fiddling by their owners—is essential. When you contract for an EMR, you should make a point of asking about your vendor's strategy to help your practice interoperate with other entities in the healthcare system. Comprehensive, integrated healthcare would be much more difficult without the ability to share data electronically.

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