

July 5, 2006

**TO: LEE COUNTY MEDICAL SOCIETY MEMBERS**  
**FROM: JULIO RODRIGUEZ, M. D., PRESIDENT**

**Return to Lee County Medical Society, PO Box 60041, Fort Myers, FL 33906**

### **ELECTRONIC HEALTH RECORDS SURVEY**

Electronic health or medical records (EHRs) are a hot topic in health care today. But how exactly will electronic health records work? Who will reap the benefits? How much will it cost? Who will pay for it? The Lee County Medical Society is involved with several healthcare organization to look at where Southwest Florida will be in the future with Technology. We will be working on creating educational materials, seminars, and developing local structures.

Help us determine where Lee County physicians are in the process and what services we should develop by taking a few minutes to complete this survey.

- 1) Are you a physician in active practice? (Circle)
  - a) Yes
  - b) No
  
- 2) Which statement best describes the current status of your practice? (Circle)
  - a) We do not plan to implement an electronic health or medical record system (EHR) (Complete Section A)
  - b) We want to implement or plan to implement an EHR (Skip to Section B)
  - c) We currently use an EHR. (Skip to Section C)

#### **Section A - Questions for practices who have no plans to implement an EHR:**

- 3) Why are you not planning to implement an EHR (check all that apply)
  - a) Near retirement
  - b) Potential benefits don't justify the cost
  - c) Cost of initial investment is prohibitive
  - d) No time for implementation and training
  - e) Concerns about electronic system reliability
  - f) Difficulty entering data
  - g) No national standards
  - h) Security, privacy, and liability concerns for myself or my patients
  - i) Other \_\_\_\_\_
  
- 4) Would any of the following convince you to implement an EHR? (check all that apply)
  - a) A government grant to help with implementation cost
  - b) An interest-free loan to help with implementation cost
  - c) Help in selecting the appropriate system for my office
  - d) Assistance in implementation and training
  - e) Evidence that it would help improve the quality of patient care
  - f) Evidence that it would reduce my liability risk
  - g) Evidence that it would improve my practice operations
  - h) A better EHR product than the ones I've seen so far
  - i) An easier way to enter information
  - j) Formal or informal standards that ensure that all systems can share information
  - k) Help from the local hospital to implement a system that interfaced with theirs
  - l) Other \_\_\_\_\_

**Skip to Q# 22**

**Section B - Questions for practices who plan to implement an EHR:**

- 5) If you want to implement an EHR, how soon do you anticipate doing so?
- a) We are in the process of implementation now
  - b) Within six months
  - c) Between six months and a year
  - d) Between one and two years
  - e) More than two years
- 6) Which of the following services would you find helpful? (Check all that apply)
- a) A technology readiness assessment of my practice
  - b) Evaluation of our existing technology and software
  - c) Guidance to appropriate and effective EHR products
  - d) Analysis of purchase and implementation costs
  - e) Help to develop an RFP and communicate with vendors
  - f) Help to coordinate implementation schedule and process
  - g) Training on the new system
  - h) Assistance to optimize new system efficiency and effectiveness
  - i) Financial assistance
  - j) Other \_\_\_\_\_
- 7) What do you hope to gain by using an EHR? (Check all that apply)
- a) Improved clinical decision-making
  - b) Improved work flow
  - c) Improved patient communications
  - d) Improved claim submission process
  - e) Improved cash flow
  - f) Improved charge capture
  - g) Improved visit coding
  - h) Improved drug refill process
  - i) Better medical records access
  - j) Reduced medication errors
  - k) Reduced transcription costs
  - l) Reduced staff expenses
  - m) Reduced costs to store and transport medical
  - n) Other \_\_\_\_\_

**Skip to Q# 22**

**Section C - Questions for practices who have an EHR:**

- 8) Is your EHR in full use by all physicians in your practice?  
 a) Yes (skip to 10)  
 b) No
- 9) If not, why not \_\_\_\_\_
- 10) What was the total purchase and implementation cost per physician \$ \_\_\_\_\_
- 11) What is the monthly maintenance cost (including any support, subscription or operation fees) per physician \$ \_\_\_\_\_
- 12) How much more were purchase and implementation costs than the initial vendor estimate? (Please give a percentage.) \_\_\_\_\_%
- 13) How satisfied are you with your EHR system?  
 a) Extremely satisfied  
 b) Somewhat satisfied  
 c) Somewhat dissatisfied  
 d) Very dissatisfied
- 14) Which statement best describes your system's reliability?  
 a) Extremely reliable – almost no system down time since implementation  
 b) Reliable - some system down time during implementation, but reliable since then.  
 c) Somewhat unreliable – occasional brief down time periods  
 d) Unreliable – one or more extended periods of down time
- 15) How important are the following features or functions of your EHR?
- |  | Extremely<br>Important | Very<br>Important | Somewhat<br>Important | Least<br>Important |     |
|--|------------------------|-------------------|-----------------------|--------------------|-----|
| a) Improved work flow                                      | 4                      | 3                 | 2                     | 1                  | N/A |
| b) Better medical records access                           | 4                      | 3                 | 2                     | 1                  | N/A |
| c) Improved clinical decision-making                       | 4                      | 3                 | 2                     | 1                  | N/A |
| d) Reduced medication errors                               | 4                      | 3                 | 2                     | 1                  | N/A |
| e) Improved patient communications                         | 4                      | 3                 | 2                     | 1                  | N/A |
| f) Improved drug refill process                            | 4                      | 3                 | 2                     | 1                  | N/A |
| g) Reduced staff expenses                                  | 4                      | 3                 | 2                     | 1                  | N/A |
| h) Improved visit coding                                   | 4                      | 3                 | 2                     | 1                  | N/A |
| i) Reduced medical records storage and transportation cost | 4                      | 3                 | 2                     | 1                  | N/A |
| j) Improved charge capture                                 | 4                      | 3                 | 2                     | 1                  | N/A |
| k) Reduced transcription costs                             | 4                      | 3                 | 2                     | 1                  | N/A |
| l) Improved claim submission process                       | 4                      | 3                 | 2                     | 1                  | N/A |
- 16) What do you like most about your EHR? (Check all that apply)  
 a) Electronic charting  
 b) Electronic prescribing  
 c) Health maintenance reminders  
 d) Clinical alerts like drug interactions or allergies  
 e) Diagnosis assistance

Continue Section C

- f) Shares information with your practice management system
- g) Shares information with hospital or ancillary providers
- h) Cost savings
- i) Good reports or reporting ability
- j) Other \_\_\_\_\_

17) What do you like least about your EHR? (Check all that apply)

- a) Increased cost without offsetting savings
- b) Difficult, awkward or time-consuming to input data
- c) Security and privacy concerns
- d) Lost productivity during implementation and training
- e) Historical documents not captured
- f) New kinds of errors are possible
- g) System not reliable
- h) Does not interface with hospital/lab/ancillary provider systems
- i) Difficult or inadequate reporting capability
- j) Other \_\_\_\_\_

18) Which EHR system are you using?

- a) A<sup>4</sup>
- b) Allscripts
- c) GE's Centricity or Logician
- d) E-MDs
- e) Epic
- f) IDX
- g) MedInformatix
- h) Medinotes
- i) Misys
- j) NextGen
- k) PMSI
- l) Pulse
- m) SOAPware
- n) Other \_\_\_\_\_

19) When you implemented your EHR, would you have benefited from any of the following types of assistance?  
(Check all that apply)

- a) A technology readiness assessment of my practice
- b) Evaluation of our existing technology and software
- c) Suggestions for appropriate and effective EHR products
- d) Analysis of purchase and implementation costs
- e) Help to develop an RFP and communicate with vendors
- f) Help to coordinate implementation schedule and process
- g) Training on the new system
- h) Assistance to optimize new system efficiency and effectiveness
- i) Financial assistance
- j) Other \_\_\_\_\_

20) What else would have helped you? \_\_\_\_\_

21) How has your EHR changed your practice? \_\_\_\_\_

## Questions For Everyone

- 22) How many physicians are in your practice? \_\_\_\_
- 23) Which of the following best describes the practice composition?
- a) Single specialty
  - b) Multispecialty with primary care
  - c) Multispecialty – no primary care
- 24) For which of the following tasks do you or your staff currently use computers in your practice (check all that apply)
- a) Electronic claim filing
  - b) Electronic calendar for use by staff
  - c) Internet appointment scheduling for patients
  - d) Electronic links to managed care plans to submit or track referrals
  - e) Submission/receipt of clinical lab orders by staff or physician
  - f) Submission/receipt of radiology or imaging orders by staff or physician
  - g) Prescription order transmitted to pharmacy
  - h) Prescription refills
  - i) Drug interaction warning system
  - j) Sharing clinical data with other health care organizations
  - k) E-mail to and from patients for administrative tasks
  - l) E-mail to and from patients for clinical tasks
  - m) On-line patient consulting for a fee
  - n) Other \_\_\_\_\_
- 25) What is your age or average age of your group? \_\_\_\_
- 26) What is your specialty? \_\_\_\_\_
- 27) Approximately what percent of the practice revenues are from:
- a) Medicare \_\_\_\_ %
  - b) Medicaid \_\_\_\_ %
- 28) Your contact information:
- |                       |       |
|-----------------------|-------|
| Name                  | _____ |
| Street address        | _____ |
| City, State, ZIP Code | _____ |
| Telephone number      | _____ |
| E-mail address        | _____ |

Thanks for taking time to complete this survey! Please return this survey by mail to:

EHR Survey, Lee County Medical Society

P. O. Box 60041

Fort Myers, FL 33906

Or by Fax to:

(239) 936-0533