Welcome to the
Next Steps When Sunsetting an EHR

The presentation will begin shortly.
Please note that all attendees are in listen only mode.
Inquiries may be submitted using the **Questions** window.
A recording of this webinar will be sent out to all attendees.

Presented by: eMedApps™ Smarter. Faster. Easier.

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Next Steps When Sunsetting an EHR

Dealing with Legacy EHR/PM Systems

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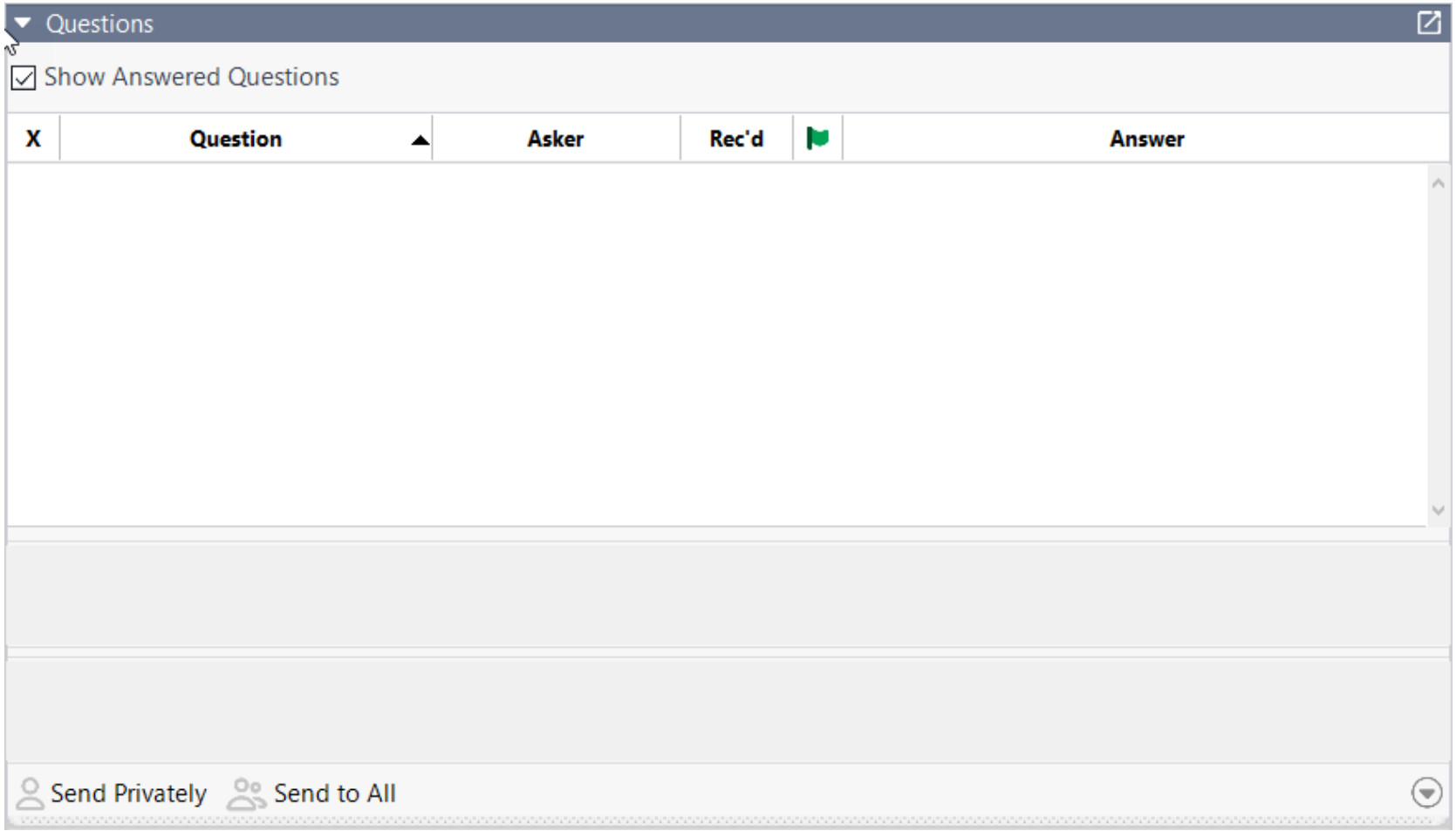

eMedApps - About Us

eMedApps is a Healthcare Information Technology Services company providing practices, clinics and hospitals with a full range of services, as well as a suite of products designed to increase efficiency and facilitate communication.

- Founded in 1999
- Working as partner with NextGen since 2001
- Worked as subcontractor for NextGen
- Serving healthcare clients across USA
- Services and Products for NextGen clients

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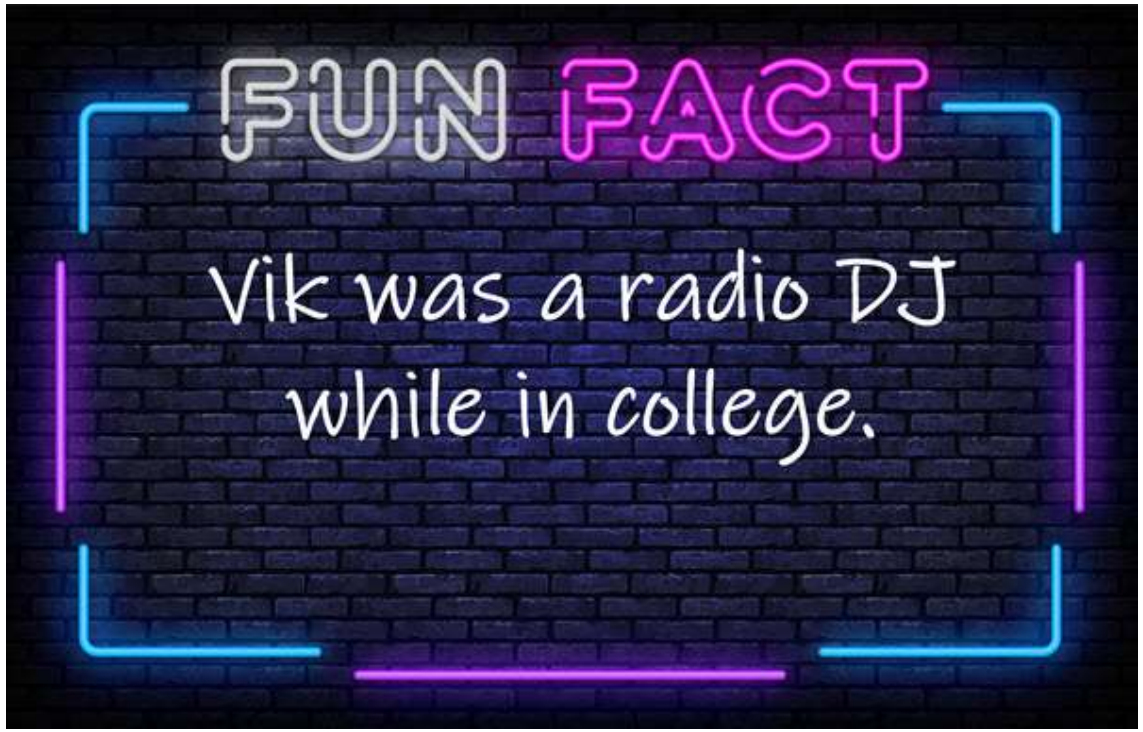
About Our Presenter

About Our Presenter

- Vik is our VP of Product Development
- He has been with the company since it's founding, and he brings his experience and deep knowledge of the healthcare community's toughest challenges to consistently deliver excellence, innovation, and success to clients.



Outline Of Todays Presentation

- Operational
  - Practice management data
  - Clinical data
- Legal compliance
  - Keeping EHR running
  - Other options

Operational

Practice Management Data

Operational

- Convert data from legacy PM to the new PM
  - Demographics
    - Need to scrub data
  - Appointments
    - Future
  - Previous billing visits
    - Lots of complexity to the data
      - Claims, Free Schedules, Contracts, Payment Plans, etc.
    - Converting previous billing visits very cumbersome and expensive task
    - Worry about bringing over bad data from current system
      - Insurance, fee schedule, etc.

Dealing with AR

- Run out AR from legacy system
  - Rebill claims from data in the legacy system
  - Patient statements, bad debt
  - Set a threshold for AR to move to new system
    - Write off remaining third party balances?
  - Can migrate patient balances to the new system and follow up on patient payments

Clinical Data

- Discrete data
  - Medications
  - Allergies
  - Lab Results
  - Histories
  - …
- Document data
  - Notes
  - Scanned Documents
  - Images

Discrete Data

- Helps maintain productivity in new system
  - Every patient does not need to charted as a new patient
  - Same purpose can be achieved via abstracting
    - Manual labor
    - Done based on the appointment book
- Need to worry about vocabulary
  - Is data coded the same way in old system and new system
  - Data translations
  - Mapping of data
- Is data represented the same way in the new system
  - Will the information from the old system make sense
  - Social Hx
- How clean is data from old system
  - Run data clean up

Document Data

- Takes up a lot of storage space
- Operationally how much of this data is needed on patients
- Charts can get cluttered in new system before you even start using
- Some mapping usually involved to map document types

Getting the Data

- How do I export data from my legacy system
  - Manual process
  - Automated process from the vendor
  - Third parties
  - APIs
- Format of the data
  - CCDAs – Discrete data
  - CSVs – Discrete data
  - PDFs/Image Files – Document data

Importing the Data

- Manual imports
  - CCDAs
  - Image and document files
- Automated Imports
  - EHR tools
  - Vendor imports
  - Third Party imports
  - APIs

Source of Legacy System

- Conversion can be dependent on type of legacy system
  - Replacement
    - Moving from legacy system a brand-new system
    - New system is generally configured using the same workflows as legacy one
    - Mapping for conversion is usually easier
  - Acquisition
    - Using a system that is already up and running
    - Workflows usually don’t match the way the legacy system was built
    - Conversion can be an issue especially when there is not too much control over new system
      - Hospital provided EHR

Legal Compliance

- Legally required to maintain records
  - General Federal requirement for Adults
    - 7 years
    - 10 years if a Medicare Advantage patient
    - Other varying requirements based on facility type and patient type
  - Varying requirements from state to state based on
    - Patient age
    - Diagnoses
  - Check with state agencies to determine minimums for your organization based on patient type

  - https://library.ahima.org/PB/RetentionDestruction#.YnrbG9rMJPY
  - https://www.healthit.gov/sites/default/files/appa7-1.pdf

Methods for keeping legacy clinical records

- Legacy System
- Archiving
- Third Party
- Cold Storage

Legacy System

- Legacy System is kept running in a read only mode
  - Scaled down implementation
  - Access restricted to records/compliance
- Pros
  - Complete access to all data in the legacy system
  - Process Release of Information the way it was done when system was live
  - Users are already familiar
- Cons
  - Expensive to pay for multiple systems
    - Some sites stop paying support
      - Large risks for loss of data if system stops operating

Archiving

- Data is extracted from the legacy system and stored in an archive
- Pros
  - Clinic has searchable access to old data
  - Can be embedded into new EHR so easy for staff to access
  - Release of Information handled by clinic staff
  - If dealing with multiple legacy systems makes workflow easy by having same workflow across multiple systems
- Cons
  - Costs are involved for archiving system
  - Staff have to learn how to user archiving system

Third Party

- Data is outsourced to a third party to manage legal compliance requirements and release of information
- Pros
  - Hands free for the clinic
  - Once the data is sent to third-party they assume responsibility for compliance
  - Release of information requests go directly to third party
- Cons
  - Generally limited to no access to the data
  - Can be quite expensive depending on amount of data

Cold Storage

- Data is extracted from the EHR and stored digitally by the clinic
- Pros
  - Cheapest option for the clinic
- Cons
  - Data is not searchable limiting its utility
  - Release of information becomes very cumbersome
    - Generally involved finding information from spreadsheets and manually assembling data for release

Questions?

info@emedapps.com

Thank You!

info@emedapps.com