

## Medicine in an electronic age

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### **Independent physician group offers technology to help docs compete**

Dr. Howard Zinman runs a tight ship.

Trained to place a high value on efficiency, the Worcester-based pediatrician monitors hundreds of patients every month, keeping track of prescriptions, scheduling appointments and recording test results.

When patients forget an appointment, Dr. Zinman sends out a personalized letter reminding them they need to reschedule. When a specialist prescribes a new medication, Dr. Zinman's records are automatically updated.

He can look up patients by ailment, appointment date, or prescription. Zinman's patient records are almost entirely digital and searchable from anywhere with an Internet connection. The best part? It's all free of charge.

### **Data dumps**

Dr. Zinman belongs to the Central Massachusetts Independent Physicians Association (CMIPA), an organization that aims at providing its members the resources and infrastructure previously only available to large, hospital-affiliated physicians groups.

CMIPA recently introduced its members to an online data warehouse system that offers the physicians all the benefits of a complex data management system without the enormous costs of licensing or developing one of their own, said Gail Sillman, executive director of the CMIPA.

Founded in 1998, the Worcester-based CMIPA is an association of approximately 200 member doctors. Qualifying physicians must be "hospital



neutral" and not employed by a large health care system such as Fallon Health Clinic or UMass Memorial Health Care, Sillman explained, although they must possess admitting privileges at either St. Vincent's Hospital or UMass Memorial Hospital in Worcester.

According to Sillman, the main issue facing independent physicians is not providing quality care, but rather implementing systems and processes that allow for easy record keeping, patient care monitoring and compliance with insurance company guidelines. Established systems can cost hundreds of thousands of dollars to license and install, she said.

"Small doctors can't afford to build or develop systems for these processes," said Sillman. "CMIPA helps provide that avenue for doctors to implement these processes for less cost."

### **Pay for performance**

Sillman explained that most insurance companies have adopted a "pay for performance" model of paying physicians. That model bases physician pay on their ability to meet certain guidelines in patient care and in various categories.

For example, Sillman said, one frequently used guideline by insurance companies mandates that 80 percent of a primary care physician's asthma patients be prescribed a controlling medication in order for that physician to qualify for bonuses from the paying company. Without a thorough data management system, it is difficult for independent physicians to know whether they comply with such measures.

Insurance companies might expect 80 percent compliance for all asthma patients," explained Zinman. "I have hundreds of patients to monitor, so how will I know that? And then a year later, Blue Cross will call you and say, 'In 2006, you didn't have enough patients on the controlling medications, so you don't qualify for the bonus.' I'm a small, solo office with only paper records, so the only other way to track that is to make phone calls or something."

### **Logging on**

With the implementation of the data warehouse system, however, Zinman said he can log on every month to check on those patients to make sure they have filled their prescriptions and are staying on top of their treatments. It helps him both meet insurance company

requirements and make sure his patients are being properly cared for.

The data warehouse system works by compiling claims information sent to insurance companies when patients go in for scheduled treatments or fill prescriptions. That information is then sent back to the CMIPA and entered into the warehouse. Information typically takes 60 to 90 days to make its way back into the data warehouse once the original claim is received by the insurance company.

"We get this information from the insurance companies as an organization," Sillman said. "Individuals couldn't access this information on their own, even with millions of dollars. It costs money to track patients. One of the goals (of the CMIPA) was to build a collective infrastructure with the idea that if we're all going to survive, we all need to tap into this system."

"In a nutshell, large organizations with large bankrolls can afford to payroll this kind of large electronic infrastructure," said Dr. George Abraham, medical director for the CMIPA. "But small-time practices are the norm today. We want to have them be able to adopt these advances in technology and improve in terms of efficiency, safety and cost effectiveness."

Zinman said the data warehouse system enables him to focus on patient care.

"It gives me the power to do what my patients like," Zinman said. "They get to see one doctor, get to speak with one doctor, and that makes them feel much more comfortable. They want to get that kind of personal touch, where one doctor can get to know their kid. To keep this style of practice, we have to be efficient and save costs. For the private, independent, solo doctor, that this is all free of charge, it's a very powerful tool."