Multiple small Kansas health departments increase revenue and reduce costs by joining forces to successfully implement an Electronic Health Record.

BACKGROUND / CHALLENGE

The state of Kansas is comprised of 105 mostly small and often rural counties, with limited funds, and a strong need to get efficient and increase reimbursements.

There were three key problems that almost every department in Kansas faced. First, each county was either still using paper forms, or an Electronic Health Records (EHR) system that was very limited and not federally certified (so they couldn’t qualify for the Centers for Medicare and Medicaid Services’ EHR incentives). Second, they had no clinical templates (so clinical charts were still manual paper charts). And finally, there were too many gaps in what they were able to automate (so too much dual data entry or worse). “We had to have something better to increase our efficiency; for getting payments in and information out” said Lynnette Redington, Health Director, Harvey County Health Department.

“We had an EHR before, but several years ago we went back to paper. The paper combined with state data systems and our accounting software resulted in extreme inefficiency and triplicate data entry in various systems. I also had difficulty auditing staff’s work. But we could never find anything affordable” said Midge Ransom, Health Director, Franklin County Health Department.

As with Harvey and Franklin counties, most other counties in Kansas were too small to move forward on their own. They wanted a system which eliminated duplicate data entry, increased reimbursements and increased organizational efficiency. What they all needed was a complete end-to-end software solution including patient intake, electronic charting and billing. They needed an EHR with modern technology which was easy-to-use and learn, was web-based, with a more automated billing process, and connectivity to state immunization registry, but most EHRs were cost prohibitive.

Key Benefits

- Modern complete, secure, federally certified EHR system
- EHR optimized for Local Health Departments
- Increased reimbursements and revenue by 25%
- Increased organizational efficiency by 12%
- Electronic connectivity to state Immunization Registry
- Fast immunization data entry
- Immunization inventory management and bar code scanning
- Standardized clinical templates
- Collective alliance between counties to pool resources and expertise
- On-site group training and ongoing user focus groups
- Meaningful Use incentives
As with any transition, there was a concern of the possibility of reduced revenue during the implementation phase if everything didn’t go just right. Furthermore, most departments did not have available resources to make the needed transition. But with a little creativity and an opportunity to join forces, the tables turned.

SOLUTION

Initially, there were two pivotal catalysts presented to Kansas local health departments. The first was an immunization grant from the Centers for Disease Control and Prevention (CDC) led by Aaron Davis, Public Health Project Manager, Wichita State University. “The grant had 2 years of planning. There had been a number of surveys across many Health Departments to find their pain points. It initially focused on the coding certification and billing education. During that grant, one department stepped forward saying they had implemented an EHR the previous year and had seen the exact same number of patients and their revenue went up by 25%. So that got the ball rolling to think maybe we were missing a major opportunity.”

After detailed review of the needs of health departments, Davis and his team decided to use the funds to help local health departments purchase an EHR that was focused on Public Health needs which had strong billing and immunization functionality. “When we saw the announcement come in, we were all for it if it meant we could get more efficiency. If we could get some money to afford an EHR, than the County Commissioners were gung-ho as well” said Redington. Ransom agreed. “We had talked about it for years so everyone was ready to get something with more efficiency and accuracy.”

The next phase was to make this project an equal opportunity for multiple departments. So applications were sent out to each county. After all the applications were submitted, the responses were plugged into a scoring matrix. “To identify the top departments we developed a scoring matrix that would purposely provide us with a diverse group, based on size, location and number of encounters” said Davis. Each of the selected counties received up to $10,000 of grant funds to use toward 75% of the purchase of an EHR.
The second catalyst was an opportunity to band together with other KS county health departments; strength in numbers. Rather than go it alone, several counties went through a collective EHR selection process. After looking at more than a dozen EHRs, and doing extensive due diligence (including in-depth demos) multiple health departments quickly realized that a general EHR would not suffice; that an EHR focused on Public Health would better fit their needs. They made a collective decision to select Patagonia Health as their EHR of choice. Users selected Patagonia Health as it includes the public health specific functionality, ease of use, and affordable pricing.

Patagonia Health also presented a unique idea to have the counties collaborate and implement portions of the process together, as a more efficient option and they were receptive. A standardized approach to implementation and shared training reduced overall cost of purchase for each health department. Instructor-led training was done in a group setting with all the departments pooling their allotted training hours, which afforded them more hours of training time at reduced costs. In addition, they each had their own go live days with trainers and billing experts on-site. “We wanted to provide top-notch service with multiple touch points with our trainers during implementation” said Don Sargent, Director of Customer Experience, Patagonia Health.

In addition to the creative cost savings offered by Patagonia Health, there was also a high level of customization work allowed for each county. “Templates are always so customized per county. When we thought about group training we thought this concept could carry over well in other areas as well. We looked for areas where collaboration would be helpful and efficient, without losing the input from the individual counties. Also, this process, in a way, jump-started the Kansas user group concept that we believe in and use in other states. User groups are our way of providing on-going advanced training and feature enhancements for users in a given state” added Sargent. “Patagonia Health came up with this great idea of getting us all on the same page which was fantastic! Templates were all standardized, they got cleaned up and became very usable and we’re very happy with it” stated Toby Harkins, Director of Nursing, Harvey County Health Department. Now, when enhancements need to be made, they can be more effective coming from the whole group. “This leads to dramatic improvements with continuity
across the state which is really what everybody wanted. We wanted to feel like we weren’t alone in our decisions, so it brought a lot of security” Harkins added.

The EHR solution included an integrated billing functionality with data scrubber for easy billing without duplicate data entry. Another feature of the software was the built-in inventory App which allows each department to track the inventory of vaccines and other medications. “The Inventory App made our world so much nicer. Our immunization encounters literally went from 30-40 minutes down to about 10 minutes which is actually the efficiency we were expecting from the system” said Harkins. Additionally, a newly added bar code scanning feature improves that process even further.

BENEFITS

One of the key benefits for each health department was that the data conversion was handled directly by Patagonia Health. They could trust that all records and other data were properly transferred into the new EHR system.

Once everything was transitioned for each county and training completed, each county successfully went live with their new EHR software. The health departments now have an efficient billing system. All charts are electronic and are compliant with federal standards for EHRs. Best of all, they are now eligible for meaningful use incentive money, and have already experienced an increase in revenue to their departments. “We have reduced our staff by one full-time office person, which I expected would happen. I can now pull data more easily. The rate with which we now get the money back is much quicker and on time, and it is much easier to track denials, the built-in eligibility checks in the system is huge – I could go on and on about what it has done for us” stated Ransom. Redington adds, “We too have reduced our staff by a full-time member, and bounced back very quickly because the turnaround is so fast; we get things done much more efficiently.”

Moving forward these counties are already benefiting from ongoing user focus training as well as a true partnership with their EHR vendor. “In doing the math, the collective group training made sense” said Davis. Although the real benefit
comes from the strengthened alliance between counties and sharing the expertise of other department’s staff members. “We’re building a local group of experts that we can each rely on” said Redington.

Steady improvements continue to be made. “If we had done this alone, we may have been a little farther along, but other departments would have been much further behind so the project has balanced things better for the group of us” according to Harkins. Given the success of the initial counties (Harvey, Franklin, Marion, Clay and Ellsworth County Health Departments), additional counties, such as Grant and Smith County and others have also decided to take advantage of the initial Kansas success with Patagonia Health EHR.

Davis summed things up. “Looking at each group that was part of the pilot, the Patagonia Health group of users have developed a large amount of trust, are very agreeable and they share more. They will continue to move forward and continue their communications and support of one another. I am comfortable that when my role is complete as part of the grant process, things are still going to move forward in a positive direction.”

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