Improve your Revenue by Overcoming Hurdles in EMR implementation

There has been a definite improvement in the United States in the adoption of Electronic Medical Records (EMR) and its implementation in the last decade (2001-2011). A report by Centers for Disease Control and Prevention (CDC) states that 57 percent of office-based physicians in the country have adopted EMRs. However, 34 percent of physicians only have a basic system, which means that only 22 percent of physicians have a fully functional EMR system. Therefore, only 22 percent of physicians are qualified for the incentives and are demonstrating “ Meaningful Use” (MU). The reasons for the poor adoption rate of fully functional EMR systems lie in the numerous functional hurdles faced by providers in successfully implementing a fully functional system.

The steep learning curve involved in fully implementing EMR/EHR systems is one of the biggest hurdles that are faced not just by physicians but also by their staff.

- The complicated process of complying with the “Core” and “Menu” objectives in the demonstration of MU is just the tip of the iceberg
- The technical support, training, maintenance, and cost of implementation are the hidden prerequisites that make the process of full EMR/EHR implementation a cumbersome and delicate process

Office-based physicians have found it more difficult to fully implement a functional and complete EMR even though they would benefit more from the incentives compared to hospitals. The revenue of office-based physicians is definitely going to be affected after 2015 when health reform policies are fully implemented. The adoption of a universal health policy that insures almost 32 million uninsured citizens has added a new dimension to the hurdles faced by physicians in the adoption and implementation of fully functional EMR systems. Physicians are short of time are striving to streamline all the processes from scheduling to revenue cycle management in order to create a steady platform for demonstrating MU through efficient EMR/EHR implementation.

The health reforms have not just affected the core functions of physicians but have also impacted the way in which various other departmental processes are carried out. The migration from ICD-9 codes to ICD-10 codes, new insurance policies, expansion of the scope of medical coding procedures, adoption of innovative IT services, and the changing payment models implicate a paradigm shift in the way health care is delivered and the way in which providers operate.

In this scenario need for an active approach through a medical billing service towards payer interaction and denial management is being felt as the wheels of health reform start to turn, medicalbillersandcoders.com, catering to US physicians across all states for more than a decade now, offer not only medical billing and coding services but also provide better revenue cycle management, professional denial management services, effective payer interaction, fully functional EMR/EHR implementation consultation and other ‘back office’ services essential for boosting revenue and providing qualitative services to patients.