Case study Cortland Eye Center

A provider of ophthalmology, optometry and optical dispensary services, Cortland Eye Center serves clients ranging in age from infants to seniors. Located in Cortland, New York, the practice of one ophthalmologist, one optometrist and five certified ophthalmic assistants sees approximately 240 patients a week. Total staff is 15.

"We began participating in PQRI (Physician Quality Reporting Initiative) in 2007," states Kim Stevens, Office Manager for Cortland Eye Center. "Tracking on paper was tedious and time-consuming. With MEDENT EMR, it's easy to identify patients who meet the criteria for PQRI. A popup box appears to remind staff that the patient qualifies for reporting PQRI measures, and participation has brought considerable increased revenue. I know of many practices that give up because they see PQRI as too complicated."

CHALLENGES

Founded in 1982 by Dr. Dean Mitchell, Cortland Eye Center has used MEDENT for billing and scheduling except for about a year in 1997 when they tried a Texas vendor's software specific to ophthalmology which resulted in major loss of revenue due to lack of awareness of New York state insurance regulations. In 2006, Dr. Jacqueline Fergerson purchased Cortland Eye Center. By 2009, the practice decided to move to an EMR to streamline the practice, improve the readability of records, reduce errors and overall make the practice a better one.

SOLUTION

In June, 2009, Cortland Eye Center began using MEDENT EMR from Community Computer Service. "What impresses me most about Community Computer is their forward thinking. I don't have to worry about whether we'll be ready for new insurance rules and regulations."

Kim Stevens, Office Manager Cortland Eye Center

Cortland Eye Center has used Community Computer's service for the creation and mailing of electronic patient statements for many years. They use MEDENT'S electronic posting and submit claims electronically to insurance companies. "MEDENT has an interface with Transworld, who handles our collection process," explains Kim. "We forward records electronically, and it takes no time on our part."

"Our lab, Cortland Regional Medical Center, shakes hands with MEDENT through the Lab Results Clearinghouse, and our disc photo, OCT and visual field equipment is interfaced with MEDENT, enabling doctors to have immediate access to results."

When patients come for appointments, staff scans their paper chart in to MEDENT. About 18 months after implementing EMR, Cortland Eye Center has retired about 75 percent of paper charts. "We predict that in less than a year we will no longer be dealing with paper charts," states Kim. "I'll have lots of old file cabinets for sale. We'll have more office space, but even better, we'll have no more lost charts."

Appointments typically begin with an ophthalmic assistant doing the initial workup. During the exam, the doctors begin their documentation, and it's then completed together with a scribe. "With MEDENT, we've been able to track certain conditions better," states Kim. "Custom templates alert staff to know what to check. The tracking in general is excellent in that it's possible to easily look back at information from the previous visit."

Cortland Eye Center uses the Point and Click DocGens technology. They use eprescribing and the drug alert, drug-drug interaction and drug-allergy interaction capabilities. "E-prescribing is great for patients in many ways," states Kim. "One is that it enables doctors to find meds in the patients' insurance formulary."

"Patient care has improved with EMR. Exams are more thorough. The documentation in patient records is more comprehensive, and doctor's notes are more detailed. Also, communication with primary care doctors is better. Results of exams are immediately available and in the hands of the referring doctor before the patient leaves the building."

Having all of Cortland Eye Center's patient information in one place means that when a patient calls, there is no longer need for staff to get up to locate the record and then flip through pages of information to try to find what is needed. "It's right there at our fingertips," explains Kim. "There are fewer errors and it takes less time. Also, now that doctors can get to MEDENT from home, if a patient calls after hours, doctors can look-up any information they need, such as results of the most recent test."

The practice uses MEDENT's Disease Management (DM) to graph results of ocular pressures and meds in flowsheets to help in managing disease with glaucoma patients. They also use the DM formulas for diabetic, macular degeneration and glaucoma patients and run tracking reports to identify diabetic patients who are in need of preventative follow-up.

"Our experience with Community Computer has been excellent right from the start. Their training and support has been very positive, and they've been there every step of the way. Since I'm not an IT person or a computer guru, it would be difficult and time consuming if I had to figure it all out."

RESULTS

Since implementing EMR, Cortland Eye Center has become more efficient and streamlined, with all information in one place. Staff can access the information they need from the office or from home. Documentation is more thorough and detailed, management of disease is more proactive and patient care has improved.

With MEDENT EMR, participation in PQRI requires minimal time and effort. Identifying patients who qualify and gathering the required information is relatively easy. The temporary increased revenue helps Cortland Eye Center address one of the biggest challenges it faces: declining reimbursements and higher overhead costs. Kim explains that reimbursement for some ophthalmology procedures has dropped by 60 percent. "A surgical procedure for which Dr. Mitchell was paid \$1800 now reimburses only \$702."

"We plan to continue to learn as much as we can and utilize all of the MEDENT modules and updates," states Kim. "You get out what you put in. What has most impressed me about Community Computer is their forward thinking. They anticipate the next step which means that I don't have to worry about whether we're ready for new insurance rules and regulations, for PQRS, Meaningful Use, ICD-10 and other government requirements."