



Healthcare IT News

PHYSICIAN PRACTICES & AMBULATORY CARE

NEWSBRIEFS

KANSAS CITY GROUP OFFERS ONLINE CONSULTATIONS

Patients of Jayhawk Primary Care in Kansas City may opt for online medical consultations in lieu of a visit to the doctor's office. Emeryville, Calif.-based RelayHealth Corp., a health communications provider, makes it possible for Jayhawk patients to consult their doctors online for non-urgent situations. Physicians can prescribe medication, offer advice, or have the patient come in for a consultation. The cost of a Web visit is \$30, as opposed to the typical \$70 to \$75 for an in-office visit. Blue Cross and Blue Shield of Kansas City has agreed to pay for the online visits. Members are responsible for a \$10 co-pay.

HIGHMARK LAUNCHES QUALITY PROGRAM FOR PHYSICIANS

Highmark Blue Shield in Central Pennsylvania announced it would increase payments to physicians who meet quality goals. The voluntary program was slated to begin April 1. It will be available to 1,300 physicians in 250 medical practices in central Pennsylvania. The aim is to reward physicians who do a good job of providing preventive care that can lower medical costs by keeping patients healthier.

BUSY CONNECTICUT GROUP AUTOMATES MEDICAL RECORDS

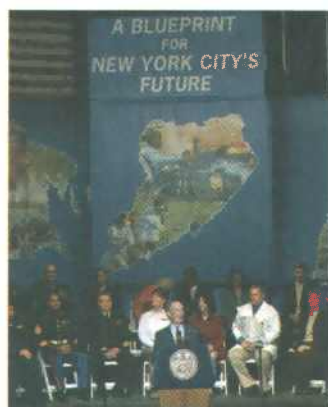
The Connecticut Multispecialty Group will change its paper medical records to digital ones. "The electronic health record will give our physicians the information and access they need to continue to deliver the best possible care at even a higher level," said Robert J. Ferrini, Sr., CEO. The group is one of Hartford's largest multi-specialty groups, currently with more than 60 physicians serving approximately 250,000 patients. Based in suburban Rocky Hill, CMG provides 10 medical specialties in 19 locations throughout the Hartford area. The group selected TouchWorks, technology developed by Chicago-based Allscripts.

IMAGING CENTERS TO UPGRADE SPEECH TECHNOLOGY

Shields Health Care Group, a magnetic resonance imaging provider, has signed a three-year agreement to replace its existing speech recognition technology with Dictaphone's PowerScribe for Radiology. Approximately 100 physicians at 25 imaging centers in Boston and the region will use PowerScribe to dictate, self-complete recognized text and electronically sign reports. Shields Health Care Group produces over 140,000 reports a year.

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Connect: PHYSICIANS 0406



New York City Mayor Michael Bloomberg announced in January the city's plans for automating medical clinics.

Big Apple embraces HIT

Pilot to provide city clinics with electronic record systems.

BY BERNIE MONEGAIN, *Managing Editor*
NEW YORK – A project to bring information technology to bear at clinics that serve some of the poorest communities in the city is under way.

The city plans to roll out electronic health record systems at

100 city-operated clinics in some of its poorest neighborhoods. With \$100 million designated for the initiative, the city is looking for the right contractor for the job. The proposals were due March 31.

At press time, the city had not announced a preferred vendor. The project is slated to begin Oct. 1. The work is slated to take four years.

As an "on-ramp" to the elec-

tronic health record launch, the city has begun e-prescribing pilot projects at four clinics. It plans to have 2,000 providers submitting prescriptions electronically in four years, according to Farzad Mostashari, MD, assistant commissioner of the city's Department of Health. Mostashari also chairs the Primary Care Information Task Force for the city.

"The vision is [NYC see page 19](#)

Cell phone to play greater role in future care delivery

Phone, computer convergence promises healthcare on the go.

BY BERNIE MONEGAIN, *Managing Editor*
SAN DIEGO – The ubiquitous cell phone, which is already part of everyday life, is poised to play an increasingly critical role in the delivery of care in the United States and around the world, predicts Don Jones, vice president of business development of healthcare at global technology company Qualcomm.

He characterizes the market sector in the "nascent, early-change" stage. But, the people he met at the conference and the products he saw indicate change will be rapid. There was a peal-and-stick sensor to monitor heart rates, technology that monitors vital signs and respiration rates, robots, and a handset

that analyzes EKG patterns and sends the information to a call center.

Jones views the cell phone as primed for monitoring functions and transmitting data.

"The main thing some companies have been focused on is using the phone as a wearable device," Jones said. "The processing power of phones are about to converge with computers."

There are a number of reasons people have to carry cell phones at all times, he said, and monitoring their health is likely to become one of them.

"For the majority of the world, the cell phone is the only computer people will own," Jones said.

Todd Churchill, a senior architect in the [CELL see page 19](#)



Don Jones



Cerner clinic

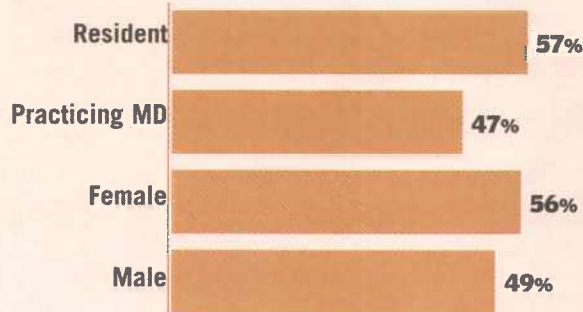
Kansas-City based Cerner Corp., which is in the business of developing healthcare information technology, will put its own software to work at a clinic it opened for its employees and their families last month on the company campus. The clinic, shown above, is staffed by two physicians, two pharmacists and a nurse.

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Connect: CLINIC 0406

Doctors look ONLINE for disease management tools

Percentage of physicians who prefer to communicate with a health plan via the Web



Connect: GRAPHS 0406

SOURCE: AMERICAN MEDICAL ASSOCIATION/FORRESTER RESEARCH 2005 PHYSICIANS AND TECHNOLOGY STUDY

UnitedHealthcare docs to test P4P in two cities

BY BERNIE MONEGAIN, *Managing Editor*

PHYSICIANS IN CHICAGO and Cleveland are steeling themselves for the launch this spring of a pay-for-performance program developed by UnitedHealthcare.

The program comes with a 5 percent increase in reimbursement to physicians who meet the insurer's standards of quality care and efficiency. There's no need to apply – United Healthcare will automatically enroll the doctors.

It seems like a boon. But for many physicians, it could be viewed as added stress, says Howard Axe, MD. Axe, an internal medicine doctor in an 18-physician group in Chicago, sits on the national Physician Advisory Committee that is helping guide UnitedHealthcare's implementation of the initiative.

If it proves successful, UnitedHealthcare plans to take the concept to other markets.

In Axe's [UNITED see page 20](#)

CELL

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innovations department at Kansas City-based Cerner Corp. said Cerner is looking at several ways the cell phone can be put to work in the medical world.

"One of the big goals is optimizing workflow," he said. "The convergence of cell phone and applications does help do that."

Beyond workflow, Churchill sees the convergence of wireless tech-

nology as moving from inside the walls (of a hospital, for example) to outside the walls.

The phone might be a good vehicle for storing a personal health record, Churchill said, or it could do double duty as a blood glucose monitor.

Wireless technology plays a key role in reducing errors and putting accurate information immediately at the clinician's fingertips, said Katarina Vuckovich, who is part of Cerner's advanced technology

group. Better information and better communication also has financial implications and a bearing on how quickly patients can get in and out of the hospital, Vuckovich noted.

Vuckovich's colleague, Nigel Keep, sees the key to more mobile use is to make phones "hands-free." Cerner partners with Vocera to provide voice-activated technology. It has about two dozen clients. "It's here and now," Vuckovich said. ■

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Free care clinic lands grant for EMRs

PINEHURST, NC – A \$141,840 grant from the Duke Endowment to FirstHealth of the Carolinas will help establish chronic disease management and electronic medical record programs at the Moore Free Care Clinic.

The grant will support a chronic disease management clinic. The clinic will conduct research into whether good man-

agement of chronic disease might prevent a significant number of unnecessary and uncompensated emergency department visits and hospital admissions by Moore Free Care Clinic patients.

The Duke Endowment plans to contribute an additional \$99,719 to the program later this year.

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NYC

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to use healthcare information technology to improve public health," Mostashari said, "to make the population healthier. What we don't want to see is a digital divide."

New York City Mayor Michael Bloomberg announced the initiative in his state of the city speech in January, saying that the goal of an electronic health record system was to "reduce preventable illness" and "save millions of dollars a year

"When you have an EMR, there's no end to what you can do."

- Farzad Mostashari, MD

wasted on needless procedures."

Bloomberg said the effort would make New York City a national leader in providing top care to the city's neediest citizens.

"When you have an EMR, there's no end to what you can do," Mostashari said.

The city committed \$25 million from its own coffers, asked the state to match the amount and is helping the clinics seek grants from the federal government and private sponsors.

Private insurers are not involved yet, but Mostashari said he expects the results of the initial pilot would appeal to payers.

To start, the project would provide electronic health record systems to about 800 primary care providers. The intent, according to the city's request for proposal, is to "reduce disparities in the quality of care by providing safety net providers with electronic health records that can interface with each other, with existing electronic information systems, and with emerging regional health information exchanges."

Eventually the project would include about 100 to 150 private medical practices that primarily serve Medicaid and uninsured patients. Also, it would include eight to 12 community health centers, one to three hospital-affiliated outpatient ambulatory care networks and about 225 providers at correctional facilities. ■

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VOICE > TEXT > DATA > KNOWLEDGE > BETTER CARE

"Dictaphone Speech Recognition has made the impossible possible: 100% physician utilization, Transcriptionist productivity gains as high as 55%, faster report turnaround, improved service to patients, and reduced costs."

Nick Tsatsis, Chief Financial Officer, AthletiCo Rehabilitation Fitness & Performance

What CFOs Want.

Staff productivity. Cost containment.

Cash flow. The daily concerns of Healthcare Chief Financial Officers (CFOs) are complex.

They want patient documentation tools that IT Departments can implement, Physicians will

use, and that achieve payback as quickly as possible. Expensive Electronic Medical Record

(EMR) systems that promise huge savings and widespread clinical impact, miss the mark when

it comes to documentation because they're often cumbersome to use. Also, they force

doctors to sacrifice the detail, completeness, and ease of narrative dictation that they

prefer and that enhance patient safety.



What CFOs Need.

CFOs need physician-friendly, clinical documentation solutions that use *Speech Recognition* and *Natural Language Processing*

to stimulate transcription productivity gains of 40-60%. They need report creation

tools that save time and money by putting Physicians in complete control of their own

reporting. They need cost savings that result in investment paybacks of a year or less.

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