

Issue Date: Vision Care Venture December 2010,

THE DIGITAL OFFICE - PART 6: CASE STUDY OF AN EHR TRAILBLAZER

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Every eyecare professional's transition from paper to digital records is unique. Here's how this multi-doctor practice found and implemented an electronic health record and practice management solution.

One of the first to establish a truly digital eyecare practice, Dr. Ken Schwaderer of Mountain View Optometry in Mountain View, CA, made the transition to electronic health records (EHR) in the mid-1990s when there were very few software products available to ECPs. A self-described "technology freak" who's now been practicing for over 40 years, Dr. Schwaderer wanted a way to streamline patient care, standardize patient records, and consolidate data from his multi-doctor practice into a single, easy-to-access system.



"I'd been searching, and looking, and studying," he said. "And I'd written some programs myself on a Mac in the office. At the time, nobody was doing medical records. People were doing accounting, frame inventory, and that kind of thing, but nobody was touching medical records because all doctors do things differently."

The Search for Software

Before going digital in-house, Dr. Schwaderer said that his practice was using a service that picked up handwritten records each week, entered them into an electronic system, and then provided the office with paper printouts. Even this rudimentary system made such a difference in the efficiency of the practice's business processes and accounting that he and his staff couldn't wait for the day when they'd be able to manage records electronically themselves.

Finding the technology to do that in the early '90s, however, wasn't a matter of selecting a software product from a list of available options. Instead, as Dr. Schwaderer quickly discovered, he was looking for technology that hadn't yet been developed. In 1995, he finally found someone who'd begun work on the right tool.

"I read an article in a journal about an optometrist in Oregon who had developed a program that worked on Macintosh computers," he said. "One of his patients was an engineer, and they were going to convert it to work on a PC." Dr. Schwaderer contacted the doctor from the article, and what has now become a 15-year relationship with an EHR product called MaximEyes was born.

Because MaximEyes combined electronic patient records capability with the practice management functionality the practice was currently outsourcing, it was a "no brainer" for Dr. Schwaderer. "I was just so excited to have it in place," he said.

The Transition to EHR

While, for most practices, two of the biggest challenges associated with going digital today are data conversion and modifying business processes to meet the needs of purchased software, Dr. Schwaderer had quite the opposite experience in 1995.

Because his practice was to be the first multi-doctor office to use MaximEyes, he was able to take a very active role in the development of the software. Rather than ask Dr. Schwaderer and his staff to adapt their records to fit a specific format, the developers instead offered to take Mountain View's records and build a technology solution around them. "It made things very easy for us," he said.

The first day with the new system, Dr. Schwaderer remembers, was very exciting. The office decided not to see any patients that first day, opting instead to spend the day in training with the MaximEyes team. The second day, as the first patient visits were completed using the new system, the MaximEyes representatives were available for questions as they arose.



“Keep in mind,” he said, “that when we converted, lots of people didn’t even have a computer at home. Many of my staff members first had to get comfortable with a computer and then learn a new program.”

So how did his staff adjust to the change? “It took the staff about a week before they were convinced that this was the way to go,” he said. After a week, scheduling was so much easier and many daily tasks were so much more efficient that there was no disputing the product’s effectiveness.

The First Year Learning Curve

Despite efficiency gains, the first year with the new system was challenging. While the developers of MaximEyes had ensured that the product was aligned with the style of Mountain View’s patient records, Dr. Schwaderer had opted not to add existing patient records into the system. Instead, patients were added as they came into the office.

“For the first year, every patient was a new patient to the system, so things did take a little longer,” he said. Even 15 years later, the office still has some patient records that are in paper form, and Dr. Schwaderer’s staff continues to maintain paper patient files for some types of information such as images and lab reports. However, the practice has recently invested in a high-speed scanner and intends to begin entering those materials into MaximEyes in the near future.



The Challenges of Hardware

One of the greatest challenges of going digital has been maintaining the necessary hardware. At Mountain View Optometry there are nearly 40 workstations, so there is always at least one unit in need of repair or replacement. “It seems like I’m replacing a computer every month,” said Dr. Schwaderer.

This isn’t necessarily uncommon. The average lifespan for a computer like the ones used in a typical eyecare practice is only two years. Choosing to take a large practice like Mountain View digital represents not only a substantial upfront investment in technology investment but also significant

ongoing maintenance costs.

The good news is that the cost of the computers needed to run the EHR system has gone down measurably since the practice first made the transition. “When we started, workstations were \$2,500 each,” he said. “Now I can get a workstation for about \$500.”

Improvements and Upgrades

Since implementing the product, Dr. Schwaderer has been actively involved with the MaximEyes development team. “When we need something changed, they’d generally change it for us,” he said, “and when they have ideas, they bounce them off of us. We’ve been very close with MaximEyes.”

The product is updated in a significant way about once every three or four years. One of the exciting features MaximEyes offers, according to Dr. Schwaderer, is that it allows individual practices to make certain customizations without compromising the integrity of the underlying software. When the software itself needs to be updated, it’s easy to identify and carry over any practice-specific customizations into the new version. This ability to customize the product to meet an individual ECP’s needs (as opposed to adjusting business processes to align with software) is one of the major advantages of choosing a solution like MaximEyes, according to Dr. Schwaderer.

Reaping the Benefits

What have been the primary benefits of going digital? “Everybody can finally read my writing,” joked Schwaderer. All kidding aside, he said that he’s very much enjoying the time-saving benefits of his EHR solution. It takes much less time now to make notes in patients’ charts. The system can be programmed with commonly used sentences, terms, and routine treatments that can be entered quickly using only a simple pull-down menu. “It just

makes things so much easier,” he said.

The process of accessing patient records later has also been dramatically improved. In particular, for a multi-doctor practice such as Mountain View, implementing EHR enhances patient care by standardizing and consolidating all records into a single location and system.

Dr. Schwaderer also reports that over the course of the last 15 years MaximEyes has been extremely reliable. “We’ve not been down for more than a day over the entire 15 years we’ve been using the product,” he said. “And even then, it wasn’t a MaximEyes issue, it was an operating system issue.”

In terms of return on investment, the greatest gains have been in time savings. “When I started practicing, we would spend an hour per patient on a full exam. Then we cut it back to 45 minutes per patient. Now we spend 30 minutes with each patient,” he said. “And that still allows me plenty of time to talk to my patients. Without the computer, I couldn’t do that.”



Lessons Learned

For ECPs making the switch to digital records today, there are an overwhelming number of practice management and EHR solutions available. And the changing regulatory environment has added urgency and depth to what is already a complicated and risky venture. According to Dr. Schwaderer, if he were choosing a technology solution now, he would take his time and look at all available options.

“I’d see what all the different bells and whistles are for each of them,” he said. “And, of course, they’d have to be Medicare-compliant. If they’re not, you might as well not even look.”

Once you’ve narrowed down your options, Dr. Schwaderer recommends speaking with or visiting a practice that is already using the system you’re considering. Watch how the staff uses the product, ask questions, and try to get an in-depth perspective on the real advantages of the product before making a decision.

Once you’ve settled on a product, allow time for training, but don’t assume that the process will be overly time-consuming or difficult. Most people are already familiar with computers, and high-speed Internet connections make training faster and less expensive. While, in 1995, Mountain View Optometry required two days and an in-house consulting team for implementation and training, most (if not all) of the same work could be done remotely today.

Dr. Schwaderer also believes that cost shouldn’t be your only consideration when selecting technology solutions for your practice. Instead, look at the support and customization options available from the developer. While MaximEyes may be more expensive than some of the other products available to ECPs now, Dr. Schwaderer feels that the software, as customized for his practice and supported over the years, has more than paid for itself in efficiency improvements.

“Minutes count,” he said. “It’s nice to have someone who can work with you, and who’s going to customize the system for your practice rather than you having to adjust to the system.”

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