

# White Paper

## The Benefits of Medical Oncology EMR

*An industry roundtable*

Terry McKay  
President and CEO  
West Michigan Cancer Center  
Kalamazoo, MI

Thomas Saphner, MD, FDACP  
Princial Investigator  
St. Vincent Regional Cancer Center CCOP  
Green Bay Oncology  
Green Bay, WI

Kim Willard  
Impac Systems Administrator  
Palmetto Hematology Oncology Clinic  
Spartanburg, SC



## About Our Experts

The implementation of electronic medical records (EMR) has become a hot topic as a component of proposed healthcare reforms. For those centers already using oncology-specific EMR systems, the benefits far outweigh any challenges. We gathered advice, input and results from three experts, each of whom has implemented a medical oncology EMR system from industry leader Elekta Impac Software. Our experts (listed alphabetically):

- **Terry McKay**, President and CEO of the West Michigan Cancer Center  
*Kalamazoo, MI*
- **Thomas Saphner**, M.D., FACP, Principle Investigator for the St. Vincent Regional Cancer Center CCOP, Green Bay Oncology  
*Green Bay, WI*
- **Kim Willard**, Impac Systems Administrator, Palmetto Hematology Oncology Clinic  
*Spartanburg, SC*

*Please see the last page for more information on our experts and their facilities.*

### Q. What is the biggest change at your center since implementing MOSAIQ software?

**McKay:** The best thing has been the tremendous calm in the office. We're not running around, looking for charts. We had college students working for us just finding records. And there are no overhead pages, because those were always searches for records.

**Saphner:** Productivity has really improved. We had a legion of people in medical records, and it cost us five bucks to pull a chart. When you think about all the times you pull those charts, it was a lot of money. We saw that an enormous amount of energy was wasted looking for charts and even handling charts. EMR is always available to us, even if we're at home. And if you have downtime at a satellite clinic, you can use the time online, approving documents.

**Willard:** The improved workflow as a result of EMR has been the most visible part of the program. You don't have four health information personnel walking around

looking for charts. Charts are available at the tips of your fingers, and can be securely accessed and reviewed from home on any configured computer with an internet connection.

“EMR is how you're going to practice medicine in the future. And the sooner you get on the bandwagon, the sooner you're going to save money for your practice.”

Terry McKay

### Q. Do you consider yourself at the forefront of technology, since you are an early adopter of EMR?

**McKay:** EMR is how you're going to practice medicine in the future. And the sooner you get on the bandwagon, the sooner you're going to save money for your practice. I get weary of people wringing their hands about the cost of EMR. That's very short-sighted, because it makes your life so much simpler.

**Saphner:** I'm here to tell you that EMR is not new, it's not visionary, it's standard. You can't provide services without EMR. You can't meet Medicare requirements. It's impossible. We're big on clinical trials and have 225 per year. Without EMR to manage all that, including the documentation to insurance and Medicare, we wouldn't be able to participate in as many trials.

Statistics show that most oncology sites are still on paper, but I can't believe it. When we made the decision, it was move to electronic records or die. If we asked our team to go back to paper, they'd revolt.

### Q. Did you have any problems getting buy-in from your staff?

**McKay:** I have mature physicians, and we all use it for medical oncology and radiation oncology.

They've become enthusiastic supporters. When they look at an enhancement, they'll ask, "How many clicks is it?" They've gotten pretty sophisticated.

**Willard:** The key to our success was to put together an implementation team composed of someone from all departments. This team had a lot of meetings, timelines and roadmaps. Now that we have implementation, we have quarterly Impac staff meetings, with all 88 employees in one big room. During this time we review errors, process changes and discuss how to improve our processes.

We also have an ongoing education process. We meet two times a year with each employee for 15 minutes, one-on-one. During this time we review their information needs and capabilities for using the system so we truly understand their processes and needs. We also meet quarterly with different departments.

#### Q. What was the patient reaction to the EMR?

**McKay:** Patients have new admiration for their physician because they can see the CT right on the screen.

**Saphner:** Patients are not the least bit amazed by electronic records. You go to JiffyLube and they have all your records, so why wouldn't your doctor? Patients expect it at this point.

#### Q. Why did you choose Elekta Impac software?

**McKay:** Impac had radiation oncology and we needed medical oncology too. We tried a third-party solution out of desperation, but the result was an unhappy staff. Impac had a very shallow learning curve and our staff was very happy with it.

We reached a turning point when we started doing our own billing. We wanted the best accounts receivable system, and at the time, Impac wasn't as good. But once our staff visited other sites, they decided to stay with Impac.

At the time, people were picking "best of breed". When we chose to stick with Impac for billing, it led us to a decision to stick with one vendor. That has served us well, since we don't have to worry about interface issues. For us, it was a good decision. Plus, customer support is excellent.

**Saphner:** When we made the decision, they were the only game in town. We wanted a system to include billing, all clinical needs and radiation oncology, if we start offering that. In 2005, Impac was the only one who did that.

However, we've been forced to look at systems again because we're looking at binding together radiation oncology. We conducted a very thorough review and we couldn't find anything better. It's at least as good as the competitors, and we believe that Impac has very good people backing it up.

**Willard:** We started looking at EMRs in 1995. We looked at mom and pop systems, Varian and several other systems. We began looking at Impac in 1995 and continued through 1999. We laid out what we wanted in an EMR system and Elekta Impac Software brought it to us.

It's been around awhile, but I don't think anyone had the complete solution until Elekta Impac Software did. They've always been the best choice for radiation oncology, and now they have medical oncology.

#### Q. Were there concerns about security?

**Saphner:** Information security is better with electronic records. With a paper document, you don't know who has seen it or where it's been. With electronic, you have a record of everyone who has opened the file.

**Willard:** EMR is sometimes seen as less secure. We have a patient population of largely elderly patients, so they had a lot of questions. We reinforced that all records are password protected. We have firewall and security, and our internal HPPA privacy and security auditors are continuously vigilant about security.

When we were acquired and became hospital-based, it made the security requirements more stringent. So we built assessments for quality, and have a real sense of pride in the levels of compliance that we've achieved. In addition, we work with MD Anderson, and they've deemed our EMR excellent.

**Q. What important benefits have you realized from using Elekta Impac software?**

**McKay:** We've had dramatic savings. We saved one-half million dollars from our operating budget – annually. We went from eight people in medical records to one, and she does other things.

The other benefit has been the elimination of onsite storage of records because they've all been scanned. The medical records room is now a fitness center for patients and employees.

The improved workflow as a result of EMR has been the most visible part of the program. You don't have four health information personnel walking around looking for charts.

Kim Willard

In the past, we took terrific care of patients, but used to measure the amount of paper that came to us every day in feet, not inches. One quality initiative we undertook was to see how fast we could get information into

patient records. Four days was the best we could do, and 6-7 days was average. Now, it's instantaneous.

**Willard:** The quality of care for the patient is at the center of what we do. We use Impac email to get questions to physicians for immediate attention, so there's less waiting. It's a quick communications tool, and information is available in real time.

**Q. How has your EMR helped to improve patient safety?**

**McKay:** Everything is now in the electronic record. You'll find legible patient orders at your fingertips in the exam room, workstation and doctor's office. If you're covering for another doctor, can see everything and provide better treatment.

**Saphner:** In the old days, you would order chemo and have 10-12 components to be entered with a ballpoint pen. The potential for mistakes was enormous. Now, you can create a care plan and standardize on that. The result is greater accuracy and safer delivery of medicines.

**Q. What do you expect to achieve in the future with your EMR system?**

**Saphner:** Elekta Impac software holds our practice together. We use it at both of our main offices; at the branch clinics, one has switched, one in process and we have two more to go. Once we achieve that, we'll all be on the system.

The real ROI happens after work patterns change, and that doesn't happen until the last doctor converts. Once that happens, you see benefits in many aspects. Once all doctors are on Impac you no longer need paper charts. One goal is to get all doctors to approve treatment plans on the computer, and the majority has already made that conversion.

**Willard:** At go-live, we were a privately owned physician group strictly focused on medical oncology. In 2008, the hospital purchased the practice, so now we're hospital owned and based.

Our goal is to merge databases with the separate radiation oncology department and have a unified patient record, since we see about 85-87% of the same patients. We're working to integrate with radiation oncology and interface with the hospital's McKesson computer system.

## About Our Experts

### **Terry McKay**

President and CEO

West Michigan Cancer Center

*Kalamazoo, MI*

[www.wmcc.org](http://www.wmcc.org)

West Michigan Cancer Center is a cooperative program for cancer treatment of the two major healthcare facilities in the Kalamazoo area, Bronson Methodist Hospital and Borgess Medical Center, which consolidates the non-surgical cancer treatment services formerly located throughout the area. The center averages nearly 80,000 patient visits annually, with more than 120 employees in 55,000 square feet of space.

### **Thomas Saphner, M.D., FACP**

Principle Investigator

St. Vincent Regional Cancer Center CCOP

Green Bay Oncology

*Green Bay, WI*

As principle investigator for the St. Vincent Regional Cancer Center, Thomas Saphner, M.D., FACP, leads the prestigious Community Clinical Oncology Program (CCOP) as designated by the National Cancer Institute. The designation makes St. Vincent one of only 63 major cancer research sites in 34 states, District of Columbia and Puerto Rico.

### **Kim Willard**

Impac Systems Administrator

Palmetto Hematology Oncology Clinic

*Spartanburg, SC*

[www.palmettoho.com](http://www.palmettoho.com)

Purchased by Spartanburg Regional Hospital System in 2008, the Palmetto Hematology Oncology Clinic has 88 employees, five physicians as well as five local offices. The clinic is affiliated with the famed MD Anderson Clinic and provides state-of-the-art cancer care for residents of upstate South Carolina.

## About MOSAIQ®

MOSAIQ, the comprehensive electronic medical record (EMR) from Elekta Impac Software, meets the specific challenges of oncology practices, large and small. From patient intake through scheduling, billing, treatment and follow-up, MOSAIQ streamlines the entire therapy workflow.

The best-of-breed solution reduces or eliminates the need for paper charts, providing a fully integrated software suite that supports a wide range of systems and devices, including laboratory functions. MOSAIQ's consolidated database allows easy integration and support for both medical and radiation oncology operations.

As an EMR solution, MOSAIQ is committed to certifying under the HiTech Act, part of the \$787 billion Stimulus Bill passed on February 17, 2009.

For more information, visit [www.elekta.com/hitech](http://www.elekta.com/hitech)

MOSAIQ streamlines business processes and ultimately helps cut costs by integrating all patient data and images into a single database with optional archiving facilities. Capable of supporting multi-vendor, multi-disciplinary and multi-site organizations, MOSAIQ provides a central database solution to ensure that information is available everywhere, every time it is required.

An international leader in the field of oncology treatment, Elekta Impac Software combines real world clinical experience with proven software solutions to create the ultimate solution for oncology management. The result is the most widely used EMR software in the field of oncology.

[www.elekta.com](http://www.elekta.com)

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**Corporate Head Office:**

Elekta AB (publ)  
Box 7593, SE-103 93 Stockholm, Sweden  
Tel +46 8 587 254 00  
Fax +46 8 587 255 00  
[info@elekta.com](mailto:info@elekta.com)

**Regional Sales, Marketing and Service:**

North America  
Atlanta, USA  
Tel +1 770 300 9725  
Fax +1 770 448 6338  
[info.america@elekta.com](mailto:info.america@elekta.com)

Europe, Latin America,  
Africa, Middle East & India  
Tel +44 1293 544 422  
Fax +44 1293 654 321  
[info.europe@elekta.com](mailto:info.europe@elekta.com)

Asia Pacific  
Hong Kong, China  
Tel +852 2891 2208  
Fax +852 2575 7133  
[info.asia@elekta.com](mailto:info.asia@elekta.com)

