Legacy Epic for Affiliated Physicians

Legacy Health

LEGACY
HEALTH

Legacy Health is offering private practice physicians a complete solution:

Legacy Epic for Affiliated Physicians (LEAP). Epic is the industry leader in integrated electronic health records and ambulatory office management systems. We are subsidizing your purchase of this system, taking advantage of changes in the Stark rules. You also may be eligible for significant federal stimulus payments by achieving "meaningful use" of the system. In addition, you may also avoid Medicare and Medicaid penalties against physicians who do not adopt and use an electronic health record.

What is LEAP?

The LEAP offering combines the Epic electronic health record with the Epic scheduling and billing products, providing a seamlessly integrated Epic solution for your office. LEAP also gives you seamless connectivity to Legacy when your patients are using our facilities and to the central patient record, showing all care rendered to your patient at other LEAP-connected practices and facilities.

There are a number of choices available as you consider electronic health records and practice management systems. We have chosen Epic as our system-wide solution, and we believe that it is the best product for independent physician practices. Also, the interconnectivity will enhance patient care across our communities.

Moreover, this isn't just a technology product offering. You are a clinical partner for us, and we have a stake in your satisfaction and success. We will be here providing you with support long after the purchase.

Offering a complete automated solution

Why an electronic health record?

An electronic health record (EHR) has advantages in the quality of patient care, your own work flow and time management, and financial management. The same federal regulations that provide incentive payments to physicians for adopting and using an EHR also provide penalties for those physicians who do not do so. With an integrated solution, there are also advantages in the speed and accuracy of insurance verification and billing. Prescribing can be automated, and transcription costs reduced.

Patient visit management and record keeping is enhanced with an EHR, using "smart" tools to speed the documentation process and track special patient needs. The database allows you to look in detail at any patient's history and also look at populations of patients, e.g., all your patients with diabetes. This tool can improve tracking, patient care and demonstration of quality outcomes.
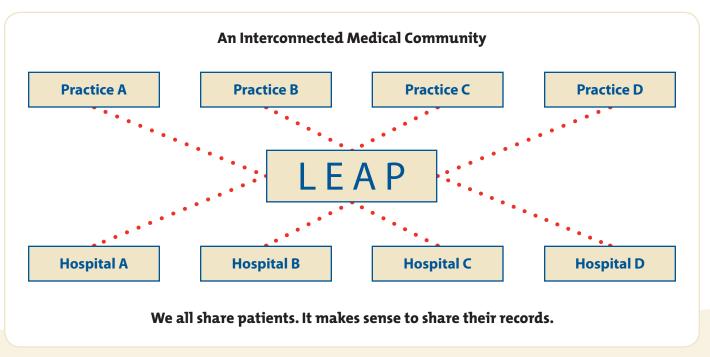
Your patients can play a greater part in their own care, using a "patient portal" to access their records, communicate with your office and even schedule appointments. It also gives you one more very powerful way to provide them with results, remind them of needed tests and answer the "Should I come in or not?" question.

The interconnected medical community

LEAP is the foundation of an integrated community medical record for your patients. A single patient record is contributed to and available to all professionals who are connected to LEAP. So when the patient is in your office, you know the details of any visits to other physicians, outpatient facilities or hospitals. We all share patients, so it makes sense to share their records.

The LEAP model makes it possible to better coordinate care, to avoid duplication of tests and to avoid problems that might otherwise not be known to you. You have real-time access to histories, including for new patients who may have entered the LEAP system through another provider or a hospital. If one of your patients is being seen in an emergency department, the physicians there have access to their history and to up-to-date information from your most recent visit with them.

Only clinical information is shared through LEAP. Your private practice information — pricing, payer contracts, fee schedules, etc. — is accessible only to you. See the sidebar for more detail.

An Interconnected Medical Community

Practice A   Practice B   Practice C   Practice D

LEAP

Hospital A   Hospital B   Hospital C   Hospital D

We all share patients. It makes sense to share their records.

Restricting clinical and financial information in Epic

Effective extension of the electronic health record throughout the community requires sharing patient information across many entities with various goals while simultaneously understanding and limiting non-critical patient, scheduling and financial information to the organization with which the patient is primarily tied. At the same time, critical information needs to be available when the practicing user is working with the patient.

Partitioning information is an integral part of the access and financial strategy for extending Epic to community users; as a result, it is important to be aware of the restriction capabilities that are available in Epic. The following provides a high-level summary of what information is shared and segregated in Epic.

Limiting information

Once a patient is active in the system, access to the patient can be limited using a number of techniques. Epic uses a concept called the Service Area to restrict financial information to a particular practice. The Service Area keeps pricing contracts, fee schedules, claims information and other billing information completely separate and non-accessible to users at other sites. With appropriate security, this information can be made inaccessible to users at the hosting organization as well.

Access information is also limited by Service Area. The ability for users to schedule and register patients is restricted by Service Area, as well as scheduling information, hospital and guarantor accounts, payers and plans, and the ability to annotate a patient's scheduling preferences. Service Areas do share selected patient demographic fields, providers to which patients can refer and lists of area employers from which users can select.

The primary reason to share patient information across practices beyond saving time, improvement in office work flow and reduction in chart pulls and paper processes is the improved and immediate access to relevant clinical information. For this reason, all patient-specific clinical information is shared within the Epic database and is limited only by exception. While a provider in one Service Area will not be able to view the schedule, patient list or reason for affiliation of a neighboring practice, the provider can access relevant clinical information about the patient if the patient presents at her practice for treatment. These shared items, among others, include:

• Allergens
• Diagnoses
• Problem lists
• Current and historical medications
• Immunizations
• Pharmacies
• Flowsheets

Beyond these items, Epic can also segment sensitive encounters and tests for specific populations of users, such as HIV clinics and psychiatric groups. When activated, information can be made accessible only to those who have a direct need to access it. Through the use of Service Areas and other functionality in Epic, private practices can use the system while maintaining the autonomy of their own practice through complete partitioning of their financial and access data from other practices, yet still maintain and access critical clinical information relevant to the patient.

Why Epic?

Epic has some 300 clients nationwide; it exchanges 1.25 million patient records per month securely on the Care Everywhere network — to and from Epic EHRs, non-Epic EHRs, HIEs and government agencies. Epic accounts of 65 percent of patient beds in Oregon.

The products we have combined to create LEAP have been rated No. 1 in their categories by KLAS, an independent national rater of health care information.

Epic has become the standard for the Portland metro region. Legacy and OHSU use Epic; Providence is implementing it. When all major providers are on an Epic system, it could create a Health Information Exchange.

Epic was founded in Madison, Wis., 30 years ago by a team of health care professionals and software developers. Their first development was a single in-patient/outpatient medical record, and that product has since formed the backbone of their EHR products. Epic only performs health care IT solutions, giving it an expertise and understanding of the challenges and benefits unique to health care.

The Epic vision of a comprehensive, integrated system wrapped around the patient led to it becoming the first vendor to hold both Inpatient and Enterprise certification from the Certification Commission for Health Information Technology.

Members of Epic's client community form a collaborative network of industry peers, with opportunities to share ideas and work together at client events throughout the year. These include Epic's annual Users' Group Meeting (UGM), focus groups to shape future development, and Epic's interactive customer website, the UserWeb. The UserWeb provides a library of more than 78,000 best practice alerts, flowsheets, templates, questionnaires, order sets and reports developed by Epic and by Epic clients in their everyday practices. Epic also organizes semi-annual roundtables and advisory councils as forums for the exchange of information and advice in specific application and role-based areas.

Why Legacy?

Legacy has made a major corporate commitment to an integrated EHR and to meaningful use. Our Epic conversion was a multi-year investment in improved patient care, enhanced integration of all care-related functions and improved efficiency of operations. A team of 500–600 people from all professions and specialties worked for two years to bring Epic to Legacy.

Legacy implemented Epic system-wide in 2010–2011. Legacy received an HIMSS Stage 7 award for both inpatient and ambulatory EHR in 2013.

Legacy has a strong leadership team in place to guide our Epic activities. Recognizing the extraordinary resource demands that LEAP could place on our resources, we are outsourcing the implementation to ensure a fast, smooth transition for affiliated physicians. We are committed to "white glove" service for the first three years of installation, while your practice comes up to speed.

Perhaps the most important answer to the question "why Legacy" is that we feel an interconnected medical community is so critical that we are prepared to make a major investment in helping affiliated physicians come on board. We will subsidize your participation in LEAP to the full extent allowed by the federal regulations.

The LEAP offering

- Free upgrades
- Care Everywhere — access to patient records from Kaiser, OHSU, Providence and others
- Meaningful Use reports
- Experienced build that is proven

LEAP brings the following capabilities to your practice, seamlessly integrated:

- Electronic health record
- Patient accounting
- Registration
- Scheduling
- Professional billing
- Visit documentation and orders
- E-prescribing
- Clinical content
- Access to Legacy Patient Index
- MyHealth patient portal

Legacy Health will take advantage of changes to federal law to subsidize your investment in LEAP. In order to be eligible for this subsidy, you must meet the following criteria:

- Be a member of the medical staff at a Legacy hospital
- Not currently possess equivalent technology or software
- Participate in Medicare and Medicaid

Pricing per billing provider

One-time fee — list price: $28,700

One-time fee — after Legacy investment: $17,300

Notes: *1) Multiple locations, add $3,800 per practice*

2) Practices larger than nine billing providers, add $2,000

3) Sales taxes will impact Washington pricing

Maintenance — list price: $10,200, first year

Maintenance — after Legacy investment: $3,100, first year

Notes: *1) Maintenance will increase by CPI through 2016*

2) Maintenance will be at list price 2016+

3) Sales taxes will impact Washington pricing

Legacy is committed to partnering with and serving LEAP clinics. In the event that the Stark Law Relaxation expires, we will work with LEAP users to discuss maintenance offering opportunities that serve their needs at a reasonable market price. The Stark Law Relaxation is projected to extend through Dec. 31, 2016.

LEAP does not include:

- Automated conversions from other systems
- Interfaces to third-party systems, such as billing providers
- Interfaces to office medical equipment
- Voice recognition software
- Customization

Some of these will be available at additional cost.

Under federal regulations, Legacy cannot provide or subsidize hardware; those costs will be the practice's responsibility. This includes office computers, printers, scanners, cabling and networking, and maintenance of these items. We plan to work with third-party suppliers to make available to you the necessary equipment through a lease option.

In addition, successful implementation will require that the practice be willing to devote physician and staff time to the project, including the designation of a clinical and administrative super-user.

*Practices with fewer than 10 billing providers will receive the Sonnet practice management suite.

Here is a brief overview of some of the ways LEAP can automate your practice.

Electronic Health Record

- The shared medical record shows all care your patient has received from LEAP-connected providers.

- The After Visit Summary gives patients a one-page summary of their visits with reminders of medication changes and instructions to take home with them after the visit.

- In Basket, Epic's secure messaging system, speeds internal communications.

- Preconfigured templates with clinical content speed up and standardize daily documentation.

- Preference lists simplify ordering by grouping the most commonly ordered medications and procedures together for easy access.

- Interaction alerts warn clinicians when they order a medication or procedure that negatively interacts with a patient's allergies or other medications and therapies at the point of ordering. These alerts help prevent patient safety risks and ensure that clinicians are aware of potential interactions.

- Customizable charting tools that allow clinicians to type a few characters that automatically expand into a longer phrase or block of text. These can be created by users and easily shared between users.

- Auditing tools allow you to better track access to your patients' records. For example, you can track which patients a user accesses, when the access occurs, and what the user does while in the record.

- Streamlined ordering with the ability to save individual preferences on user-created preference lists. This functionality allows users to configure orders exactly the way they want to order them, saving time and improving efficiency.

Scheduling and registration

- Schedule, check in, confirm and reschedule appointments, including walk-ins, using a simple drag-and-drop scheduling process.

- Identify available appointments using features such as color-coded slots, multiple scheduling views (for a single provider or several at once) and the ability to see openings via the schedule scanner without opening a schedule.

- View all appointments in specific departments, check patients in and out, schedule walk-ins and register patients directly from the interactive Department Appointments report.

- Register patients, update demographic and co-pay information, and verify insurance when the patient is checking in for an appointment.

- Confirm appointments, follow up with no shows and send out appointment-reminder letters to help lower the no-show percentage.

- Receive alerts and warnings about incomplete registration information.

- With Epic's MyChart application, patients can request, change, cancel and receive reminders about appointments from home.

Billing

- The system sends and receives electronic claims and remittance.

- Charge triggering produces charges from orders signed by physicians, greatly reducing manual charge entry.

- Standard 835 electronic remittance loaders and standard remittance codes allow for automatic payment posting and follow-up routing with existing electronic remittance payers.

- Reporting Workbench, Epic's ad hoc reporting tool, allows staff to target specific transactions based on a variety of criteria, including balance, payer, date and procedure. These subsets can then be exported to Excel for other reporting purposes or uploaded to a work queue for targeted work.

- Pre-built procedure records and associated fee schedules are available to streamline charge master creation.

- Several standard receipt and patient statement packages are available for immediate use.

- The Claim Edit Assistant walks end users through the claim error correction process to help catch the most common claim errors.

Our legacy is yours.

Legacy Health strives to make responsible printing and paper choices that minimize our effect on natural resources.

Legacy Health

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