



# 2009 EHR Survey

A photograph showing a close-up of a silver stethoscope resting on a laptop keyboard. A red pen is also visible on the keyboard. The background is slightly blurred, showing more of the laptop and keyboard.

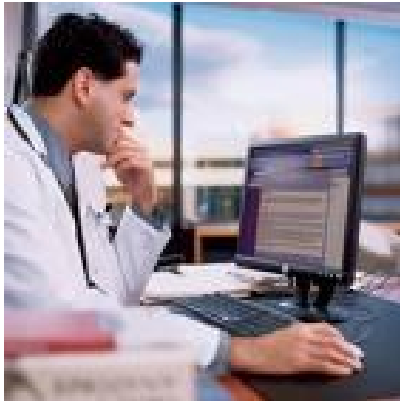
Electronic Health Records:  
Keys to Achieving Value and  
Improving Care



During Q2 2009, the American Medical Group Association (AMGA) conducted a survey with the help of the JHD Group, a physician practice management, office technologies, and healthcare management consulting firm. This survey included AMGA members and non-members and was designed to understand the experience of physicians and mid-levels regarding the implementation and utilization of Electronic Health Record and Practice Management systems, with a particular focus on identifying the key success factors to capturing the benefits offered by these critical tools.

Survey invitations were sent to several senior leaders in each organization. The AMGA members were strongly interested in sharing their experiences, as evidenced by the 52% response rate from the 309 member organizations that submitted at least one response. At many of those groups, multiple leaders submitted responses. Additionally, 39 surveys were submitted by physicians and top administrators of large, non-member medical groups.

This data provided a very rich sample from which to draw conclusions on the factors that distinguish groups that derive the greatest benefits from their EHRs from those that are still struggling to capture the potential value represented by these increasingly ubiquitous tools.

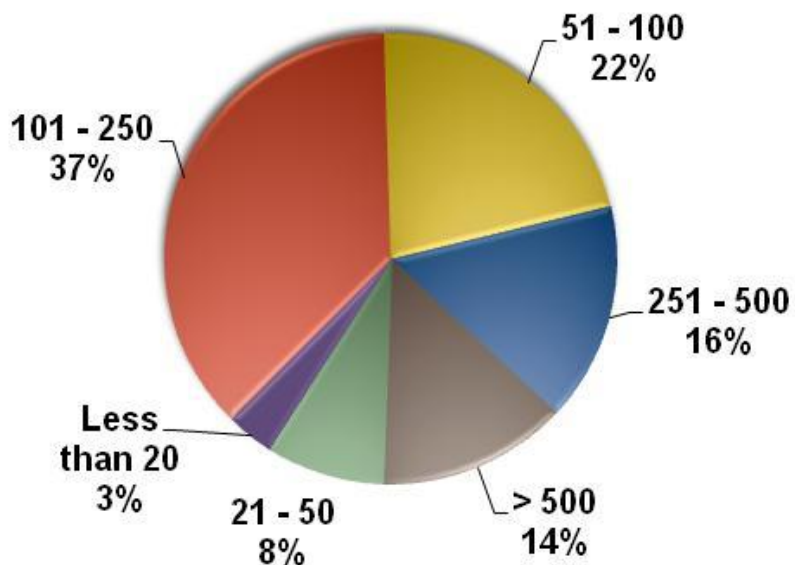


The American Medical Group Association (AMGA) represents medical groups, including some of the nation's largest, most prestigious medical practices, independent practice associations, and integrated healthcare delivery systems. AMGA improves health care for patients by supporting multispecialty medical groups and other organized systems of care. The members of AMGA deliver health care to approximately 96 million patients in 49 states. Headquartered in Alexandria, Virginia, AMGA is the strategic partner for medical groups providing a comprehensive package of benefits, including political advocacy, educational and networking programs and publications, benchmarking data services, and financial and operations assistance. [www.amga.org](http://www.amga.org)

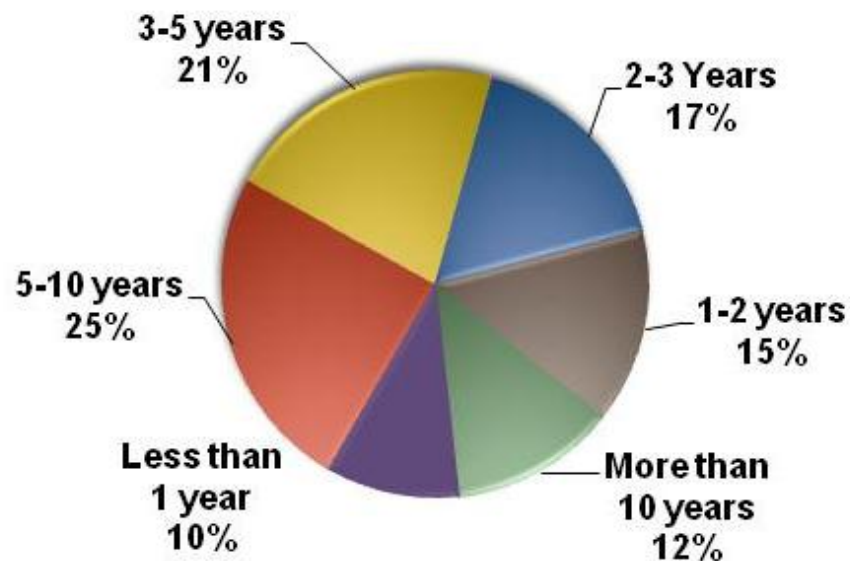
JHD Group is a leader in assisting physician organizations to meet the challenges of care delivery, managed care, technology, compliance, and patient services. The JHD Group focuses on driving the operational excellence and financial results that clients seek through their expert comprehensive clinical integration, management consulting, and practice management services. [www.jhdgroup.com](http://www.jhdgroup.com)

Responses to the survey primarily came from larger (+100 physician and midlevel FTE) groups that have been utilizing EHRs in their practices for 3 or more years. This 59% level of “long-term” (>3 years) EHR use is much higher than the rates reported by most of the surveys being published regarding EHR adoption among US physicians. It also reflects the position of the AMGA member organizations as industry leaders in information technology use, complemented by their historical and recognized leadership in clinical services.

### Group Size



### Years with EHR



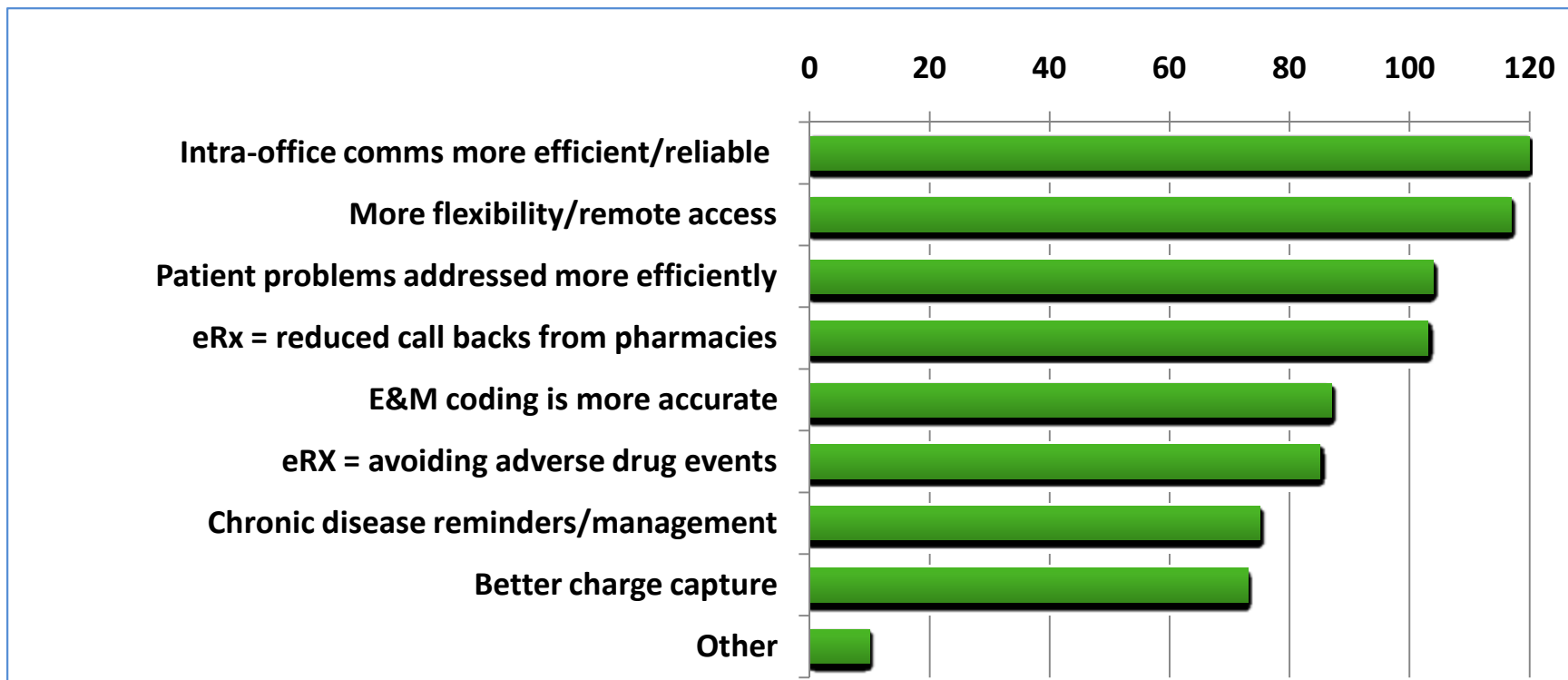
Several major themes emerged from the response data.

1. Healthcare professionals view EHRs as both an important tool and a significant investment that is critical to the future success of their groups. Expectations of the benefits offered by EHRs are both broad and deep. They include supporting improvements in clinical quality, patient service, operational efficiency, financial performance through managing risk or capturing incentive revenues, and market position.
2. Today's EHR systems require substantial time for training, planning, and customization to meet the varied needs of different specialties and differently configured practices. Additionally, implementation of an EHR system requires substantial investment above and beyond the licensing and training costs in order to deliver the full potential. System implementations are highly disruptive and resource-intensive. They should be carefully planned to ensure a successful launch.
3. Capturing the potential benefits from an EHR is an ongoing effort and even the most successful users have captured only a part of their expected and desired benefits. These benefits only result after workflow redesign, adjustments to the division of labor/staff utilization, and expanding utilization of the system capabilities.
4. Experience breeds optimism. Groups almost universally report increased expectations for the value delivered by EMR systems across a variety of features and functions, even before those groups have captured the benefits they expected the systems to deliver prior to implementation.
  1. Ongoing education and training is critical to realizing the benefits offered by EHRs. Even among groups with self-rated high achievement and high expectations of their systems, there remains confusion (including at the leadership level) of what their systems are currently capable of delivering to the groups.
  2. Patience and persistence are among the most critical success factors. The groups capturing the most benefits from their EHR systems are those who introduce functionality in stages, allow time for the physicians and staff to develop proficiency in subsets of capabilities at a pace they are able to absorb, and plan carefully for the rollout/extension of system functionality. Groups with the greatest/longest experience with the systems (e.g., > 5 years) are also those with the greatest success in capturing benefits and satisfaction with their EHR systems.

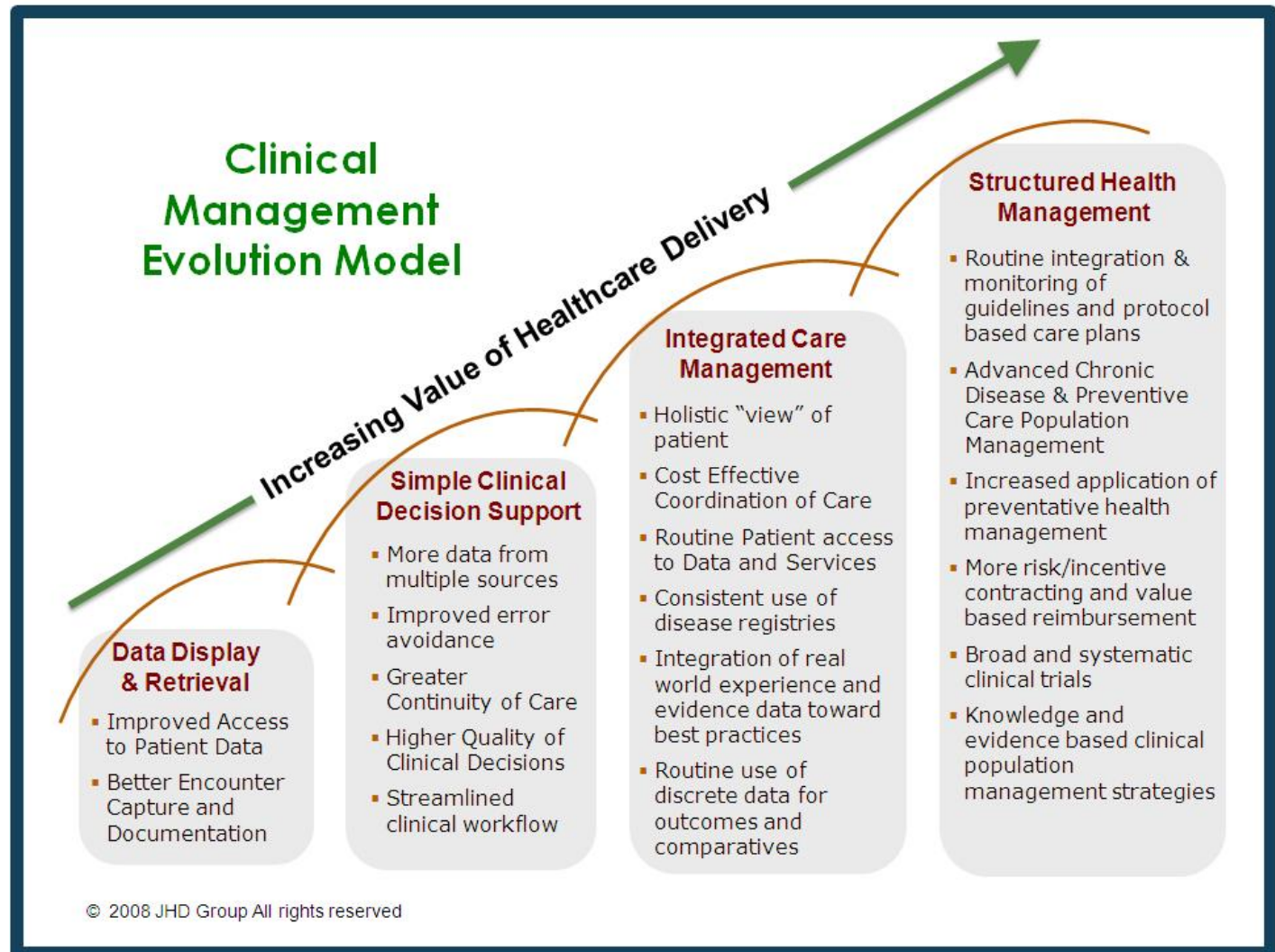


Optimism

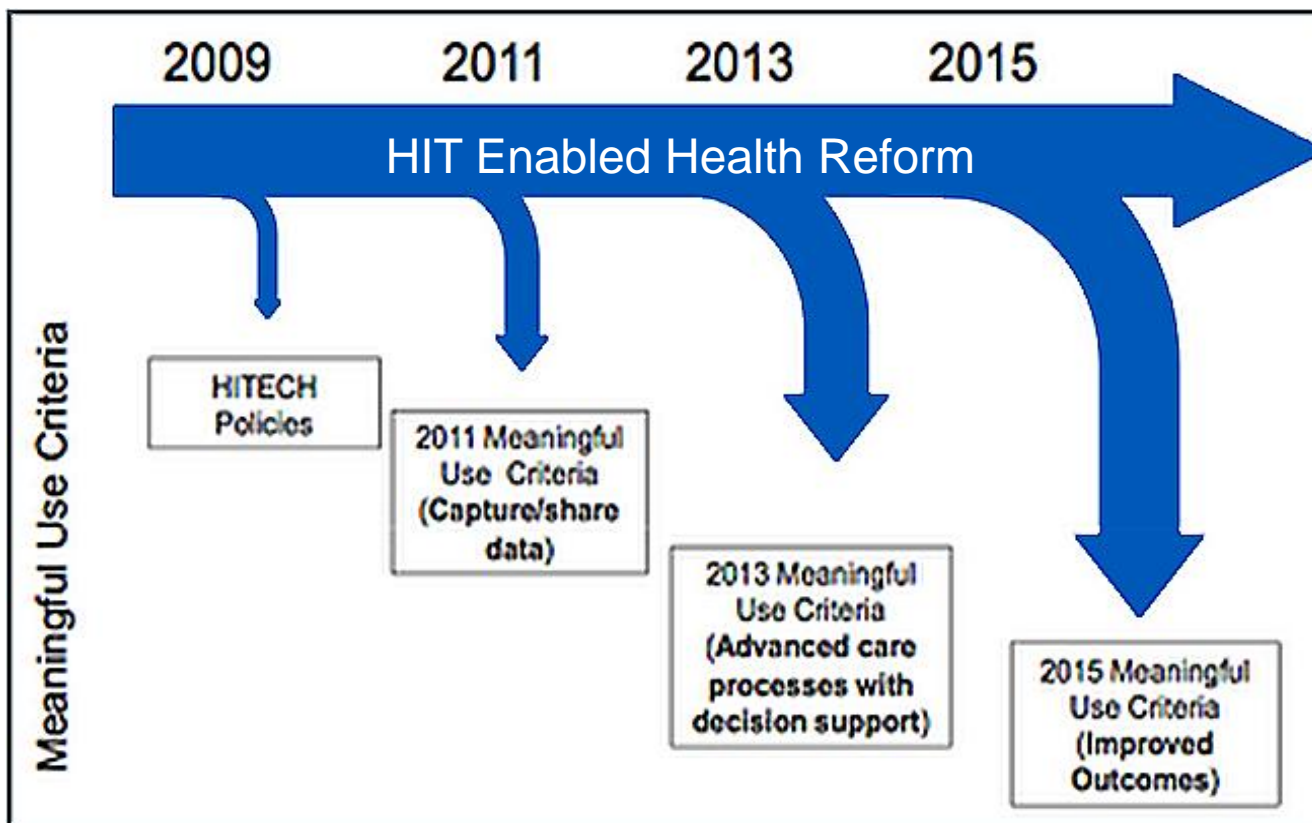
Has your practice experienced any of the following changes in healthcare delivery that can be attributed in part or in full to use of an EHR? (check all that apply)



Benefits and Value change and increase in complexity over time



Demands of government and payer programs will increase and become more complex over time

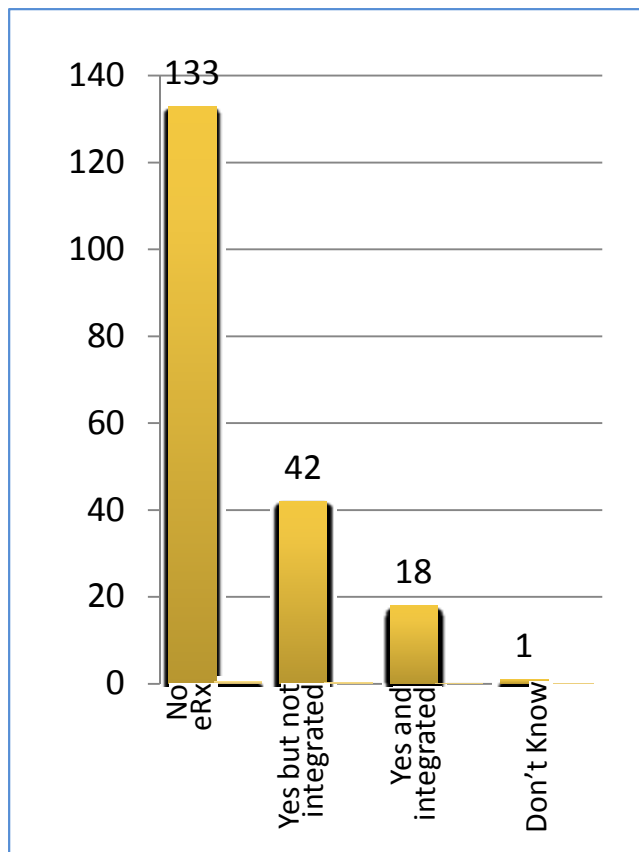


Example: a 200 physician group ramp up to achieve “meaningful use”

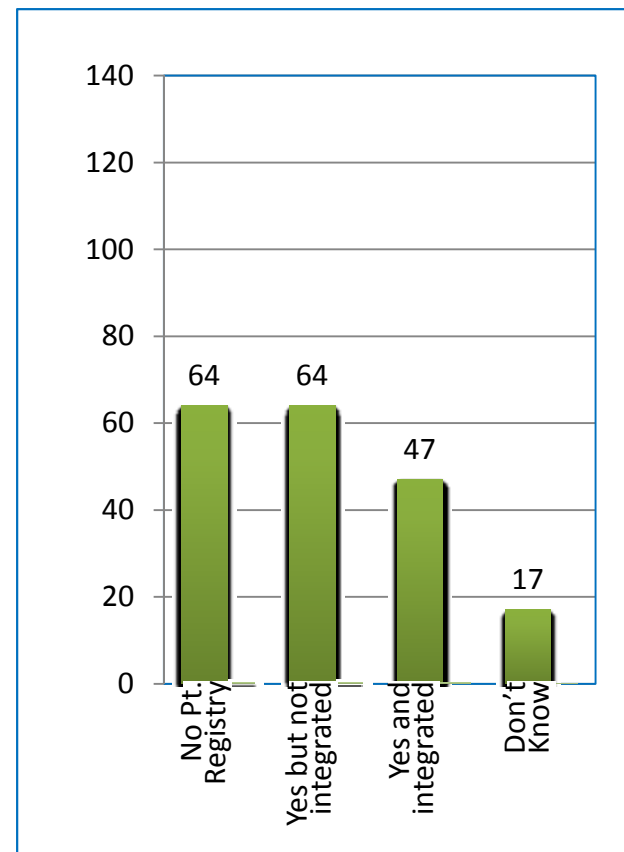
Payment Year	Number of Physicians Effectively Using EHR			
	2011	2012	2013	Total
	80	80	40	200
2011	\$1,440,000			\$1,440,000
2012	960,000	\$1,440,000		\$2,400,000
2013	640,000	960,000	600,000	\$2,200,000
2014	320,000	640,000	480,000	\$1,440,000
2015	160,000	320,000	320,000	\$800,000
2016		160,000	160,000	\$320,000
	\$3,520,000	\$3,520,000	\$1,560,000	\$8,600,000

The majority of respondents indicated that their EHR systems were integrated with a Practice Management system. The majority of respondents do utilize ePrescribing and most programs are integrated with the EHR. Slightly more than half of respondents do utilize a Patient Registry, but only a third have an integrated capability.

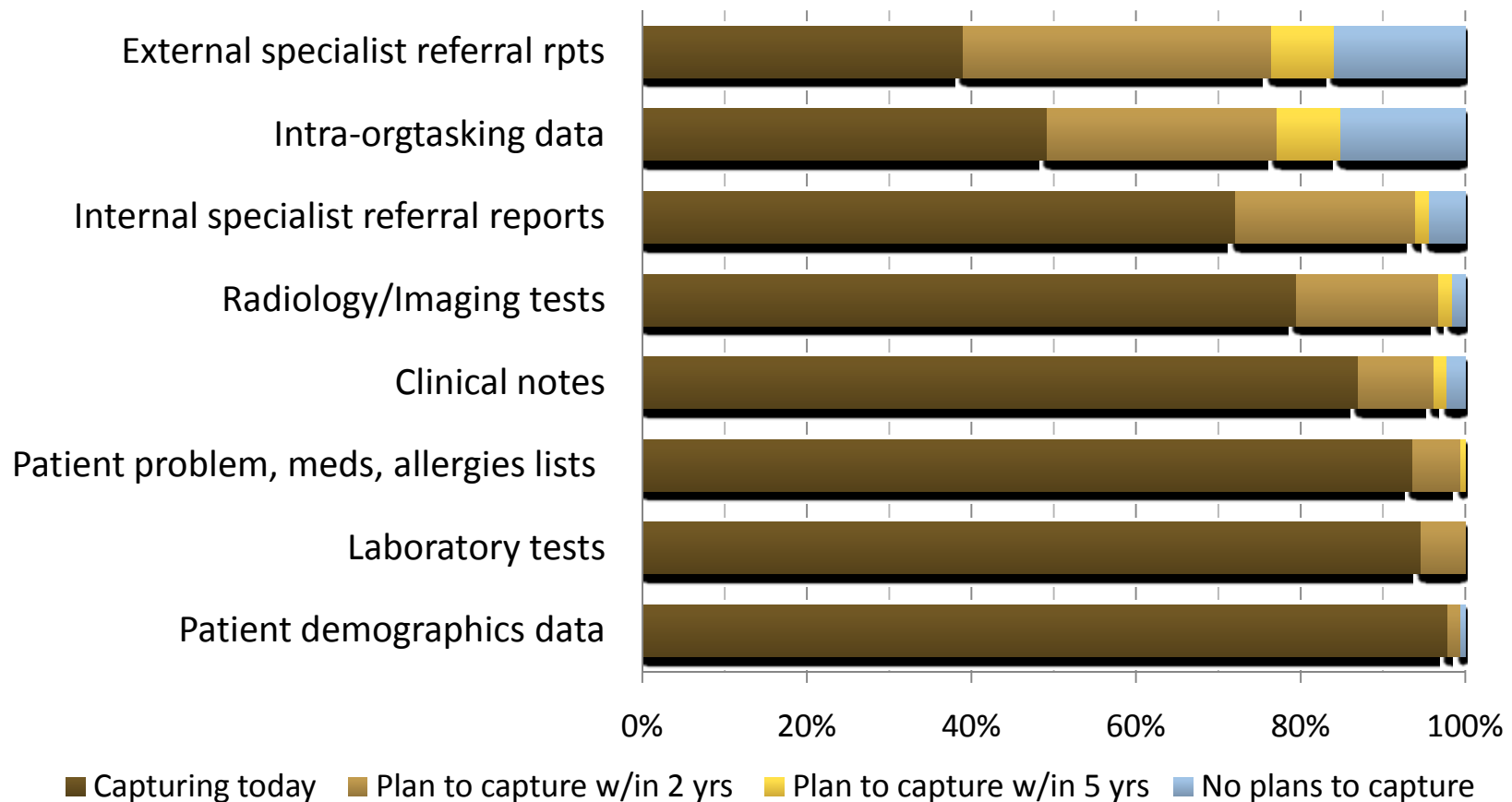
**eRx integrated with EHR**



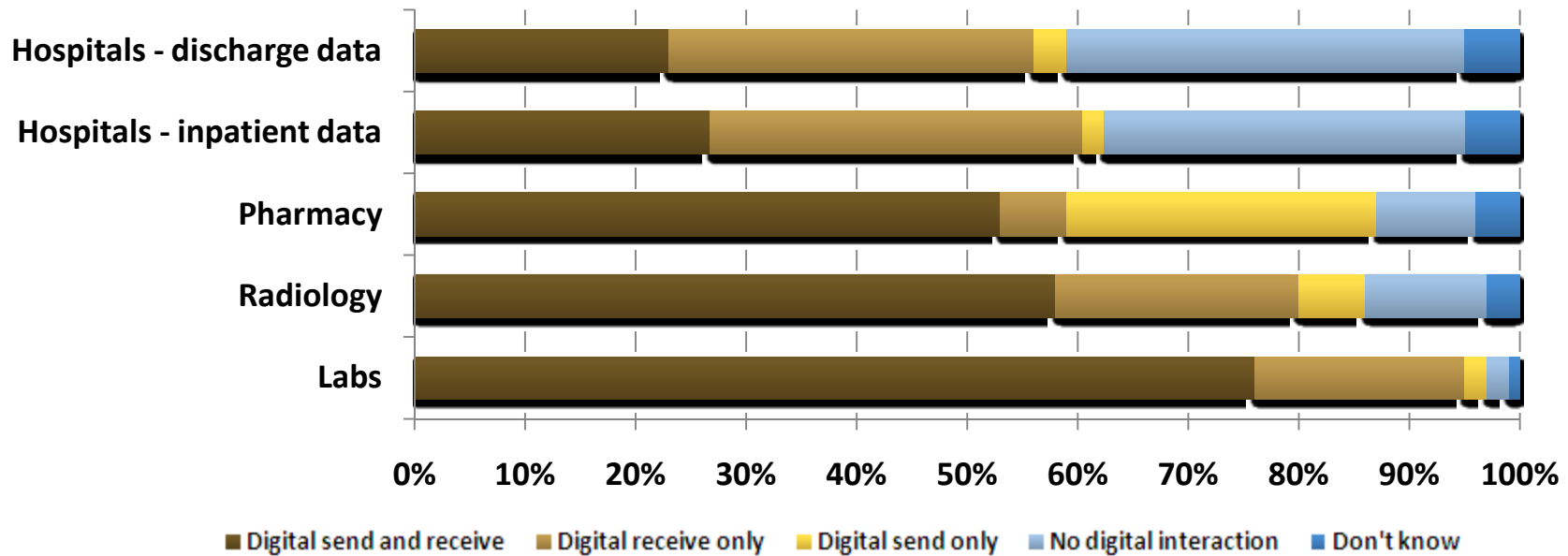
**Patient Registry integrated with EHR**



The survey results and follow-up interviews clearly indicate that the ability to access extensive patient data quickly is an early and significant benefit from implementing an EHR. This observation is supported by the fact that multiple data sets are currently being captured in most EHR systems.



We wanted to understand whether systems were simply sharing data in a digitized format, like a pdf, or whether they were transmitting computable data that could be manipulated in the EHR system. Survey results indicate that laboratory information has a high level of computability, followed by radiology reports and pharmacy records. Hospital inpatient and discharge information is not generally transmitted in a computable form.

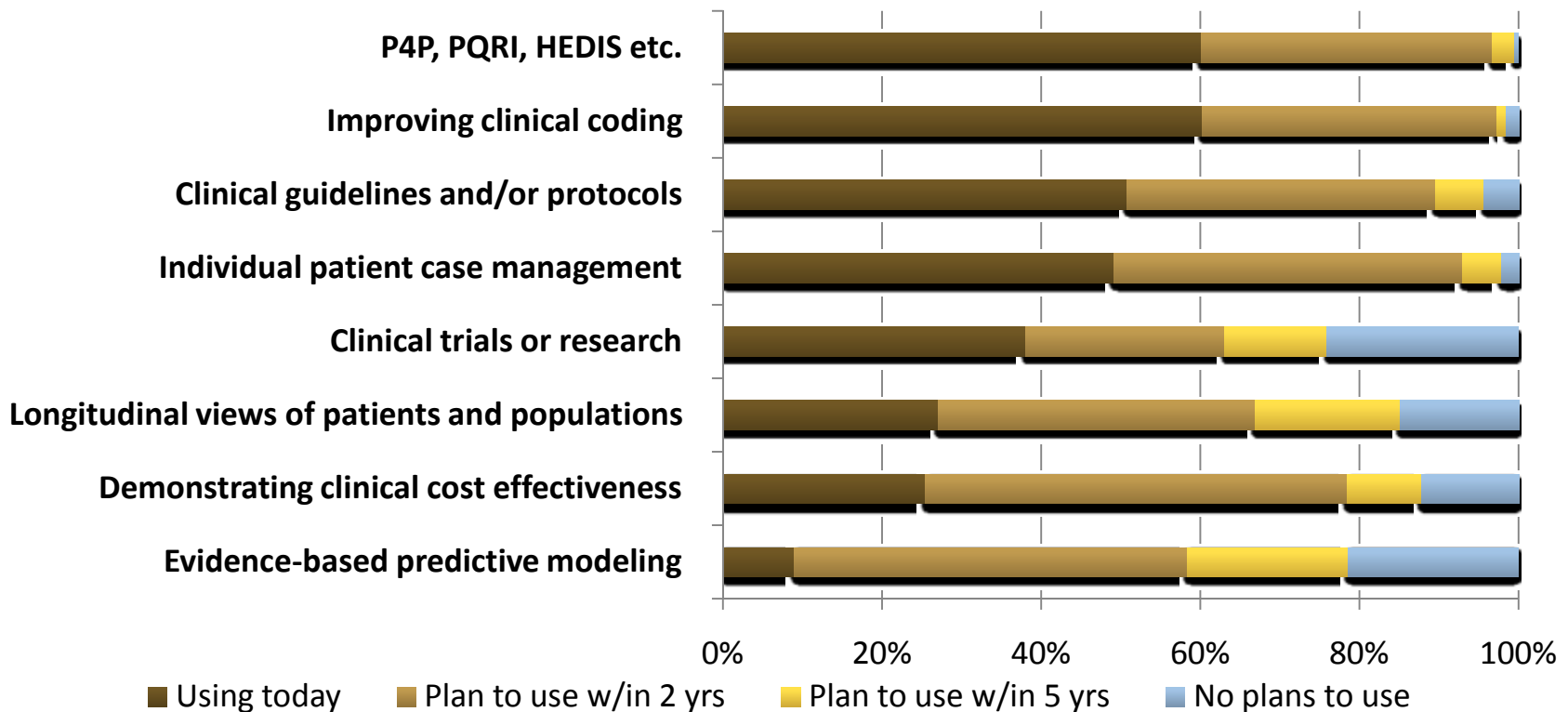


One of the widely heralded features of an EHR is the ability to report data that can be used to meet payer, government, or internal performance guidelines.

More than half the respondents indicated that they are currently using their output to support improved coding, incentive programs, patient case management, and adherence to protocols. More than 95% do so now or plan to do so within 2 years.

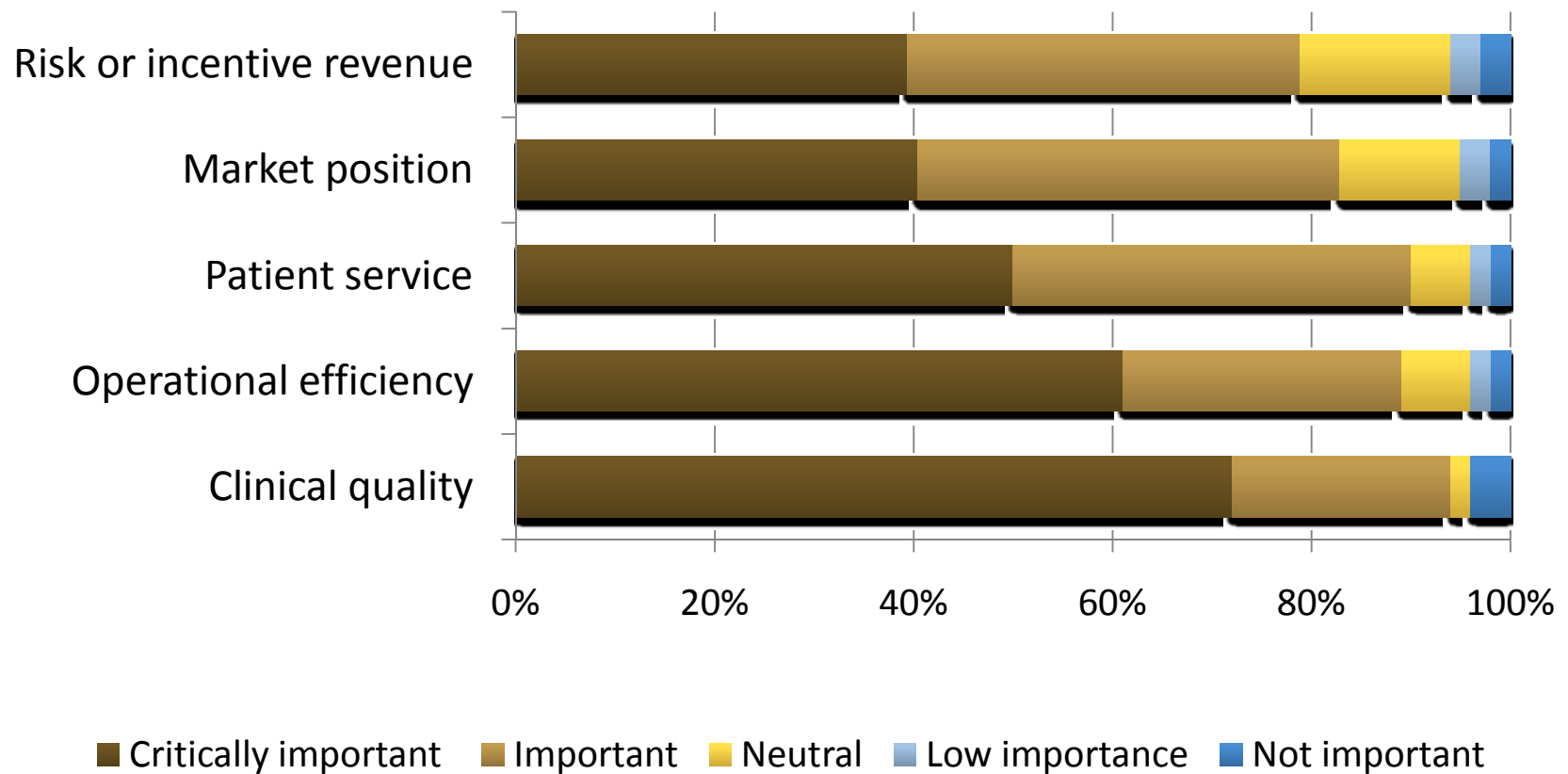
About a quarter of respondents were using their output for more complicated programs such as demonstrating clinical cost effectiveness, looking at longitudinal patient data, or clinical research and trials.

Fewer than 10% are currently able to do evidence-based predictive modeling and more than 40% plan to wait 5 years or have no plans to do so.



Surprisingly, while garnering incentives is a strategic imperative for nearly 40% of respondents, quality, efficiency, and service are rated as much more critically important to these organizations.

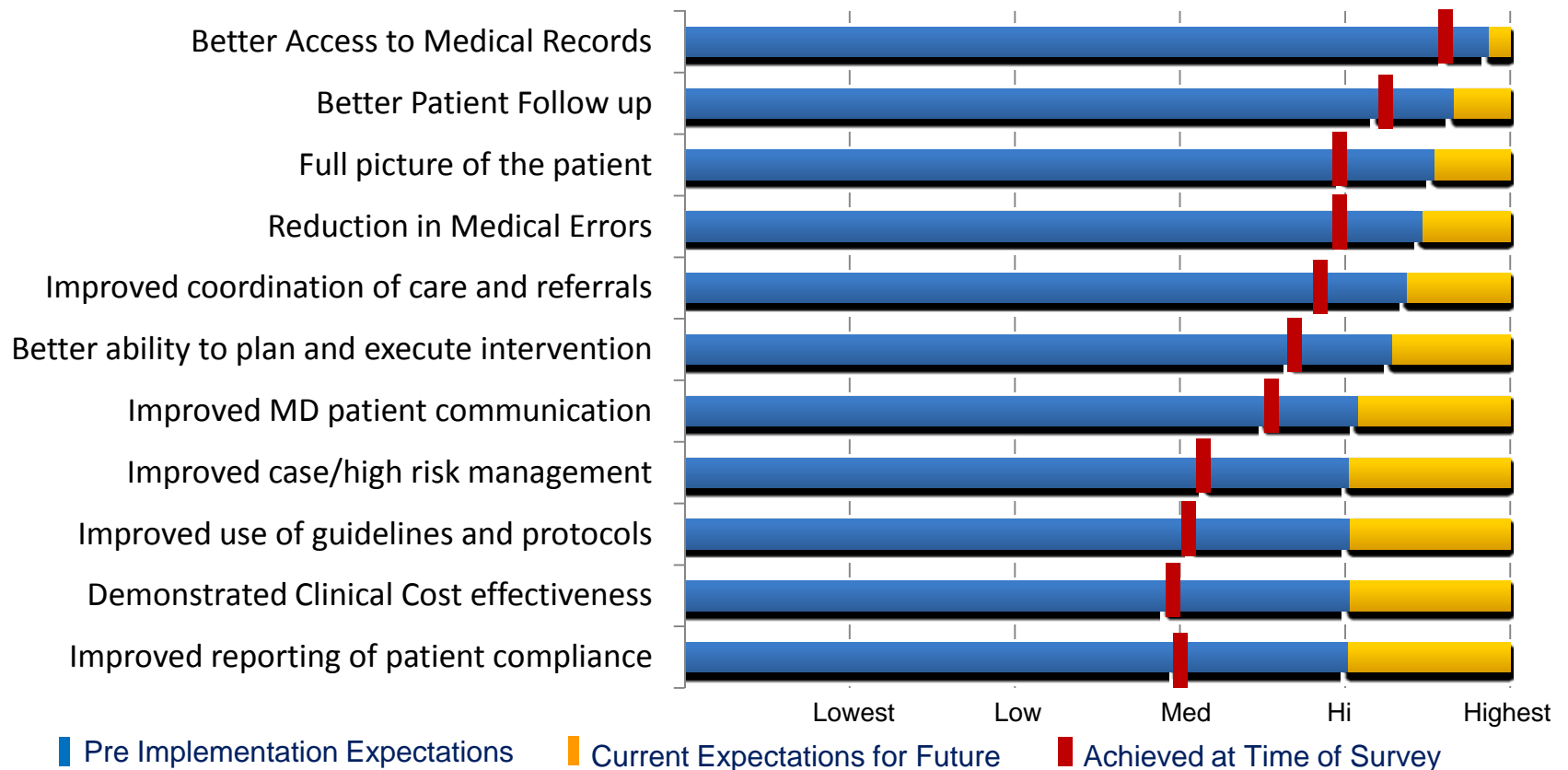
In fact, market positioning for providers was rated as slightly more important than incentive revenues.

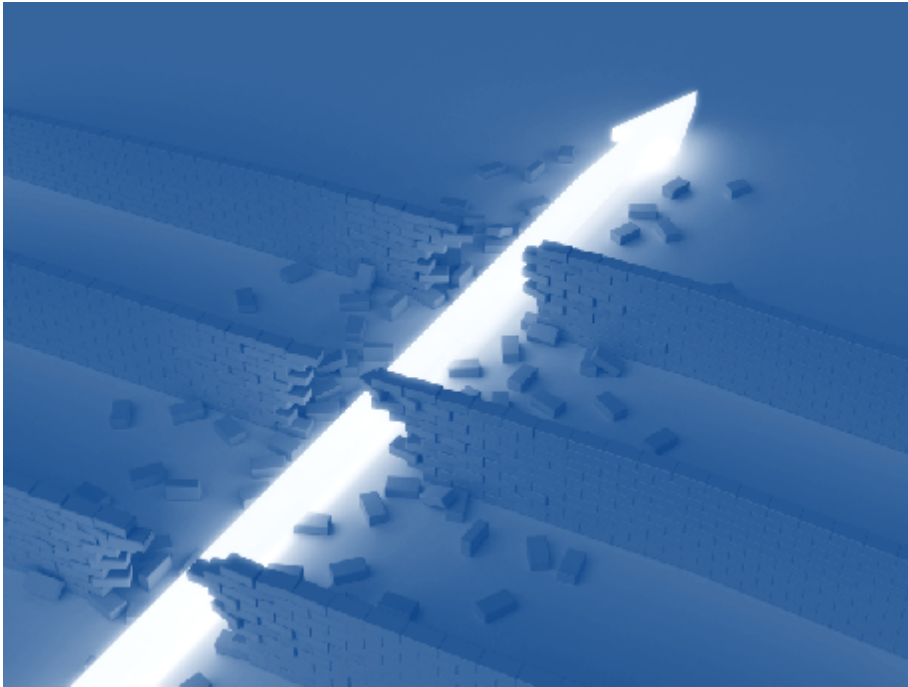


# Expectations v. Results

Respondents were asked to indicate the level of expectations for various benefit categories shown below. The inquiry explored expectations from the start of implementation, how much they felt they had achieved at the time they responded to the survey, and what their ultimate level of expectations were at the time of the survey.

Overall, expectations across all categories were highest to high going in to an EHR implementation and as the implementations continued or were completed, expectations actually rose significantly for future achievement of benefits.





- § Work toward a team model that gets everyone working at the top of their licensure including physicians
- § Focus on clinical outcomes
- § Invested the time and resources required
- § Maintain a persistent focus on fully integrating the emerging system

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# Appendix

## All Responses

<b>1. How many FTE providers (physicians and mid-level's) are in your organization?</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
101 - 250	87	0.37
51 - 100	51	0.22
251 - 500	37	0.16
> 500	32	0.14
21 - 50	20	0.09
Less than 20	8	0.03
Total Responses:	235	
<b>2. Does your organization use an Electronic Health Record (EHR) system?</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
Yes	201	0.86
No	34	0.14
Total Responses:	235	
<b>3. Does your organization plan to implement an EHR system in the future?</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
Yes, within 2 years	28	0.82
Yes, within 5 years	5	0.15
Not Sure	1	0.03
Total Responses:	34	
<b>4. When did your organization start to utilize your current Electronic Health Record (EHR) system?</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
5-10 years ago	49	0.25
3-5 years ago	42	0.21
2-3 Years ago	33	0.17
1-2 years ago	29	0.15
More than 10 years	25	0.13
Less than 1 year ago	20	0.1
Total Responses:	198	

## All Responses (Cont.)

<b>5. Is your EHR integrated with a Practice Management System?</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
Yes	135	0.68
No	30	0.15
Not sure	8	0.04
Other	25	0.23
Total Responses:	198	
<b>6. Does your organization use a Patient Registry and if so, is it integrated with an EHR?</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
No, we do not use a Patient Registry	81	0.35
Yes, we use a Patient Registry and it IS integrated with an EHR	76	0.33
Yes, we use a Patient Registry but it is NOT integrated with an EHR	55	0.24
Not sure	21	0.09
Total Responses:	233	
<b>7. Does your organization use ePrescribing capabilities and if so, are they integrated with an EHR?</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
Yes, we use ePrescribing and it IS integrated with an EHR	159	0.68
No, we don't use ePrescribing	53	0.23
Yes, we use ePrescribing but it is NOT integrated with an EHR	20	0.09
Not sure	3	0.01
Total Responses:	235	
<b>8. Does your ePrescribing capability address requirements for Medicare 2009 e-Prescribing incentive program such as the following: (check all that apply)</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
Ability to select medicines, print prescriptions, electronically transmit prescriptions, and conduct all alerts	158	0.91
Complete active medications list, incorporating data received electronically from pharmacies and pharmacy benefit managers (PBMs)	92	0.53
Ability to easily identify lower cost, therapeutically appropriate alternatives (e.g., tiered formulary information)	87	0.5
Patient specific concurrent formulary and authorization requirements (received electronically from PBM)	55	0.32
Other	17	0.17
Total Responses:	174	

## All Responses (Cont.)

<b>9. Does your EHR solution include any of the following? (check all that apply)</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
Patient portal / Secured patient communications	84	0.66
Physician portal (physician to physician)	84	0.66
Community Health Exchange	12	0.09
Other	10	0.1
Total Responses:	127	
<b>10. Does your Patient Portal give your patients the ability to: (check all that apply)</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
Request prescription refills	71	0.87
View lab results	59	0.72
Schedule appointments	46	0.56
Update their demographic information	45	0.55
Access a personal health record	43	0.52
Complete 1st time visit paperwork	32	0.39
Update their insurance information	29	0.35
Complete patient satisfaction surveys	12	0.15
Have access to formulary for patient benefit plan	4	0.05
Other	14	0.14
Total Responses:	82	
<b>11. Labs</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
Digital (computable) send and receive	143	0.76
Digital (computable) receive only	35	0.19
No digital interaction (uses fax, hard copies, etc.)	4	0.02
Digital (computable) send only	3	0.02
Don't know	2	0.01
Total Responses:	187	

## All Responses (Cont.)

<b>12. Radiology/Imaging</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
Digital (computable) send and receive	107	0.58
Digital (computable) receive only	41	0.22
No digital interaction (uses fax, hard copies, etc.)	20	0.11
Digital (computable) send only	12	0.06
Don't know	6	0.03
Total Responses:	186	
<b>13. Pharmacy</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
Digital (computable) send and receive	96	0.53
Digital (computable) send only	50	0.28
No digital interaction (uses fax, hard copies, etc.)	17	0.09
Digital (computable) receive only	10	0.06
Don't know	8	0.04
Total Responses:	181	
<b>14. Hospitals: for in-patient data</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
Digital (computable) receive only	60	0.34
No digital interaction (uses fax, hard copies, etc.)	58	0.33
Digital (computable) send and receive	47	0.27
Don't know	8	0.05
Digital (computable) send only	4	0.02
Total Responses:	177	
<b>15. Hospitals: for discharge notes</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
No digital interaction (uses fax, hard copies, etc.)	64	0.36
Digital (computable) receive only	59	0.33
Digital (computable) send and receive	41	0.23
Don't know	9	0.05
Digital (computable) send only	5	0.03
Total Responses:	178	

## All Responses (Cont.)

<b>16. Do you collaborate with Payors using your EHR in terms of: (check all that apply)</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
We do not collaborate with Payors using EHR	83	0.45
Excellence of Care incentives (P4P, value based reimbursement,etc)	76	0.42
Selected disease management programs	57	0.31
Case management for potential "high cost" conditions	25	0.14
Member/Patient Satisfaction	14	0.08
Other	16	0.16
Total Responses:	183	
<b>17. Has your EHR favorably impacted clinical workflow in the following categories: (check all that apply)</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
Across your delivery system - e.g.. multiple providers and/or multiple sites.	152	0.84
Around the individual provider(s)	129	0.72
Within the individual clinic(s) - e.g.. among all providers at a single site.	127	0.71
Other	18	0.18
Total Responses:	180	
<b>18. Do most of the users in your organization enter data via templates as opposed to relying on narrative or dictation entries in the "notes" fields?</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
Some use the templates, some enter narrative in the "notes" fields	103	0.57
Most use the templates most of the time	43	0.24
Most enter narrative in the "notes" fields	19	0.1
All use the templates nearly all of the time	10	0.05
Other, N/A	7	0.06
Total Responses:	182	

## All Responses (Cont.)

<b>19. Are you using, do you plan on using the EHR data to support: (check all that apply)</b>					
<b>Item</b>	<b>Using today</b>	<b>Plan to use within 2 years</b>	<b>Plan to use within 5 years</b>	<b>No plans to use</b>	<b>Total</b>
P4P, PQRI, HEDIS and other quality/ incentive programs	110	67	5	1	183
Improving clinical coding	111	68	2	3	184
Demonstrating clinical cost effectiveness	46	96	17	22	181
Individual patient case management	90	80	9	4	183
Evidence based predictive modeling	16	88	36	38	178
Longitudinal views of patients and populations	49	72	33	27	181
Clinical guidelines and/or protocols	92	70	11	8	181
Clinical trials or research	68	45	23	43	179
Average %	40.1	40.4	9.4	10.1	1,450.0
Total Responses:	186				
<b>20. Are you routinely capturing, or do you plan on capturing the following data in digital (computable / structured) data form: (check all that apply)</b>					
<b>Item</b>	<b>Capturing today</b>	<b>Plan to capture within 2 yrs</b>	<b>Plan to capture within 5 yrs</b>	<b>No plans to capture</b>	<b>Total</b>
Patient demographics data	182	3		1	186
Patient problem, medication, allergies lists (as a part of a structured patient care program)	174	11	1		186
Clinical notes	161	17	3	4	185
Laboratory tests	175	10			185
Radiology/Imaging tests	147	32	3	3	185
Internal specialist referral reports	132	40	3	8	183
External specialist referral reports	71	68	14	29	182
Intra-organizational tasking data	88	50	14	27	179
Average %	76.8	15.7	2.6	4.9	1,471.0
Total Responses:	186				

## All Responses (Cont.)

<b>21. Are you currently measuring return on investment (ROI) for your EHR system?</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
No, we don't formally measure ROI	88	0.51
Yes, and the measures are both qualitative and quantitative	37	0.21
Yes, and the measures are mainly quantitative	17	0.1
Yes, and the measures are mainly qualitative	13	0.08
Other	18	0.18
Total Responses:	173	
<b>22. Has your practice experienced any of the following changes in healthcare delivery that can be attributed in part or in full to use of an EHR? (check all that apply)</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
Intra-office communication is more efficient and/or more reliable (for example, as a result of phone note and work list features)	146	0.85
Physicians have more flexibility because test data and/or charting is available remotely	144	0.84
Patient problems are addressed more efficiently during office visits (for example, as a result of a better managed patient problem list)	125	0.73
E-prescribing has contributed to reduced call backs from pharmacies	120	0.7
E-prescribing has contributed to avoiding adverse drug events	99	0.58
E&M coding is more accurate	98	0.57
Chronic disease reminders have contributed to Chronic Disease management	86	0.5
Charges are captured more effectively	85	0.49
Other	13	0.13
Total Responses:	172	
<b>23. Do you have a process for improving the use/benefits of your EHR?</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
Yes	159	0.9
No	9	0.05
Not sure	9	0.05
Total Responses:	177	

## All Responses (Cont.)

For the following categories of EMR benefits, please indicate level of expectation in your organization for the following: (check all that apply)

<b>24. Better access to medical records and/or patient data</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
5 Expected Highest	120	0.75
4 Expected Hi	32	0.2
3 Expected Med	9	0.06
Total Responses:	161	
<b>25. Better access to medical records and/or patient data</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
5 Achieved Highest	96	0.56
4 Achieved Hi	48	0.28
3 Achieved Med	22	0.13
1 Achieved Lowest	2	0.01
2 Achieved Low	2	0.01
Total Responses:	170	
<b>26. Better access to medical records and/or patient data</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
5 Future Highest	121	0.82
4 Future Hi	21	0.14
3 Future Med	5	0.03
Total Responses:	147	
<b>27. Better/easier patient follow-up</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
5 Expected Highest	76	0.48
4 Expected Hi	51	0.32
3 Expected Med	28	0.18
2 Expected Low	3	0.02
Total Responses:	158	

## All Responses (Cont.)

<b>28. Better/easier patient follow-up</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
4 Achieved Hi	59	0.35
5 Achieved Highest	53	0.32
3 Achieved Med	44	0.26
2 Achieved Low	10	0.06
1 Achieved Lowest	1	0.01
Total Responses:	167	
<b>29. Better/easier patient follow-up</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
5 Future Highest	99	0.67
4 Future Hi	37	0.25
3 Future Med	10	0.07
2 Future Low	2	0.01
Total Responses:	148	
<b>30. Reduction of medical errors</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
5 Expected Highest	71	0.45
4 Expected Hi	52	0.33
3 Expected Med	26	0.16
2 Expected Low	6	0.04
1 Expected Lowest	3	0.02
Total Responses:	158	
<b>31. Reduction of medical errors</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
4 Achieved Hi	61	0.38
3 Achieved Med	57	0.35
5 Achieved Highest	31	0.19
2 Achieved Low	10	0.06
1 Achieved Lowest	3	0.02
Total Responses:	162	

## All Responses (Cont.)

<b>32. Reduction of medical errors</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
5 Future Highest	98	0.64
4 Future Hi	40	0.26
3 Future Med	12	0.08
1 Future Lowest	1	0.01
2 Future Low	1	0.01
Total Responses:	152	
<b>33. Full "picture" of the client</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
5 Expected Highest	75	0.48
4 Expected Hi	44	0.28
3 Expected Med	30	0.19
2 Expected Low	5	0.03
1 Expected Lowest	2	0.01
Total Responses:	156	
<b>34. Full "picture" of the client</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
4 Achieved Hi	62	0.38
3 Achieved Med	47	0.29
5 Achieved Highest	37	0.23
2 Achieved Low	10	0.06
1 Achieved Lowest	6	0.04
Total Responses:	162	
<b>35. Full "picture" of the client</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
5 Future Highest	101	0.67
4 Future Hi	35	0.23
3 Future Med	12	0.08
2 Future Low	2	0.01
1 Future Lowest	1	0.01
Total Responses:	151	

## All Responses (Cont.)

<b>36. Improved physician-patient communication</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
3 Expected Med	49	0.3082
4 Expected Hi	46	0.2893
5 Expected Highest	43	0.2704
2 Expected Low	16	0.1006
1 Expected Lowest	5	0.0314
Total Responses:	159	
<b>37. Improved physician-patient communication</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
3 Achieved Med	75	0.4545
4 Achieved Hi	40	0.2424
2 Achieved Low	20	0.1212
5 Achieved Highest	20	0.1212
1 Achieved Lowest	10	0.0606
Total Responses:	165	
<b>38. Improved physician-patient communication</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
5 Future Highest	71	0.4702
4 Future Hi	54	0.3576
3 Future Med	22	0.1457
1 Future Lowest	2	0.0132
2 Future Low	2	0.0132
Total Responses:	151	
<b>39. Better ability to plan and execute interventions</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
4 Expected Hi	53	0.3464
3 Expected Med	43	0.281
5 Expected Highest	42	0.2745
2 Expected Low	11	0.0719
1 Expected Lowest	4	0.0261
Total Responses:	153	

## All Responses (Cont.)

<b>40. Better ability to plan and execute interventions</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
3 Achieved Med	73	0.462
4 Achieved Hi	43	0.2722
5 Achieved Highest	17	0.1076
2 Achieved Low	16	0.1013
1 Achieved Lowest	9	0.057
Total Responses:	158	
<b>41. Better ability to plan and execute interventions</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
5 Future Highest	67	0.4497
4 Future Hi	55	0.3691
3 Future Med	23	0.1544
1 Future Lowest	2	0.0134
2 Future Low	2	0.0134
Total Responses:	149	
<b>42. Improved coordination of care and referrals</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
4 Expected Hi	57	0.3563
5 Expected Highest	52	0.325
3 Expected Med	44	0.275
2 Expected Low	4	0.025
1 Expected Lowest	3	0.0188
Total Responses:	160	
<b>43. Improved coordination of care and referrals</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
4 Achieved Hi	62	0.369
3 Achieved Med	59	0.3512
5 Achieved Highest	28	0.1667
2 Achieved Low	13	0.0774
1 Achieved Lowest	6	0.0357
Total Responses:	168	

## All Responses (Cont.)

<b>44. Improved coordination of care and referrals</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
5 Future Highest	83	0.557
4 Future Hi	49	0.3289
3 Future Med	14	0.094
2 Future Low	2	0.0134
1 Future Lowest	1	0.0067
Total Responses:	149	
<b>45. Improved case management/ high risk patient management</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
4 Expected Hi	58	0.3766
5 Expected Highest	40	0.2597
3 Expected Med	33	0.2143
2 Expected Low	19	0.1234
1 Expected Lowest	4	0.026
Total Responses:	154	
<b>46. Improved case management/ high risk patient management</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
3 Achieved Med	59	0.3758
4 Achieved Hi	42	0.2675
2 Achieved Low	33	0.2102
5 Achieved Highest	13	0.0828
1 Achieved Lowest	10	0.0637
Total Responses:	157	
<b>47. Improved case management/ high risk patient management</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
5 Future Highest	80	0.5333
4 Future Hi	49	0.3267
3 Future Med	15	0.1
2 Future Low	6	0.04
Total Responses:	150	

## All Responses (Cont.)

<b>48. Improved reporting of patient compliance</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
4 Expected Hi	51	0.3228
3 Expected Med	40	0.2532
5 Expected Highest	30	0.1899
2 Expected Low	25	0.1582
1 Expected Lowest	12	0.0759
Total Responses:	158	
<b>49. Improved reporting of patient compliance</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
3 Achieved Med	59	0.3688
2 Achieved Low	40	0.25
4 Achieved Hi	34	0.2125
1 Achieved Lowest	20	0.125
5 Achieved Highest	7	0.0438
Total Responses:	160	
<b>50. Improved reporting of patient compliance</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
5 Future Highest	56	0.366
4 Future Hi	48	0.3137
3 Future Med	32	0.2092
2 Future Low	14	0.0915
1 Future Lowest	3	0.0196
Total Responses:	153	
<b>51. Improved use of guidelines/protocols by providers</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
4 Expected Hi	48	0.3097
5 Expected Highest	45	0.2903
3 Expected Med	43	0.2774
2 Expected Low	11	0.071
1 Expected Lowest	8	0.0516
Total Responses:	155	

## All Responses (Cont.)

<b>52. Improved use of guidelines/protocols by providers</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
3 Achieved Med	58	0.3766
4 Achieved Hi	44	0.2857
2 Achieved Low	29	0.1883
1 Achieved Lowest	13	0.0844
5 Achieved Highest	10	0.0649
Total Responses:	154	
<b>53. Improved use of guidelines/protocols by providers</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
5 Future Highest	84	0.549
4 Future Hi	47	0.3072
3 Future Med	20	0.1307
1 Future Lowest	2	0.0131
Total Responses:	153	
<b>54. Demonstrated clinical cost effectiveness</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
4 Expected Hi	48	0.3038
3 Expected Med	46	0.2911
5 Expected Highest	38	0.2405
2 Expected Low	19	0.1203
1 Expected Lowest	7	0.0443
Total Responses:	158	
<b>55. Demonstrated clinical cost effectiveness</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
3 Achieved Med	58	0.3694
4 Achieved Hi	39	0.2484
2 Achieved Low	36	0.2293
1 Achieved Lowest	16	0.1019
5 Achieved Highest	8	0.051
Total Responses:	157	

## All Responses (Cont.)

<b>56. Demonstrated clinical cost effectiveness</b>		
<b>Value</b>	<b>Count</b>	<b>Percent</b>
5 Future Highest	66	0.4342
4 Future Hi	49	0.3224
3 Future Med	30	0.1974
2 Future Low	6	0.0395
1 Future Lowest	1	0.0066
Total Responses:	152	

<b>57. Are you currently addressing or do you have a plan to address the following?</b>			
<b>Item</b>	<b>Yes</b>	<b>No</b>	<b>Total</b>
Establishing common policies, definitions and guidelines to reduce variation of practice	159	20	179
Managing information overload at the physician level	135	42	177
Redesigning the roles of physicians around EHR capabilities	145	34	179
Redesigning the roles of mid-levels around EHR capabilities	142	37	179
Redesigning the roles of clinical support around EHR capabilities	166	11	177
Average %	83.8	16.2	891
Total Responses:	180		

## All Responses (Cont.)

<b>58. How critical is your EHR to meeting your organizational goals for:</b>							
<b>Item</b>	<b>Critically important</b>	<b>Important</b>	<b>Neutral</b>	<b>Low importance</b>	<b>Not important</b>	<b>Not applicable</b>	<b>Total</b>
Clinical quality	131	39	4		7		181
Patient service	91	72	10	4	4		181
Operational efficiency	110	52	12	3	3		180
Risk or incentive revenue	70	71	27	6	5	1	180
Market position	72	76	22	5	4	1	180
Average %	52.5	34.4	8.3	2	2.5	0.2	902
Total Responses:	181						
<b>59. Which of the following do you consider your most significant hurdles to implementing an EHR in the future?</b>							
<b>Item</b>	<b>Huge hurdle</b>	<b>Significant hurdle</b>	<b>Somewhat of a hurdle</b>	<b>Minor bump</b>	<b>Not an issue</b>	<b>Not applicable</b>	<b>Total</b>
Board / leadership commitment	2	3	5	6	17	1	34
Physician resistance	2	5	15	7	5		34
Concerns about interoperability with other provider systems	3	9	13	6	3		34
Concerns about the value an EHR can really deliver	4	6	11	5	8		34
Cost/Investment	13	12	4	4	1		34
Other	2	1				5	8
Average %	14.6	20.2	27	15.7	19.1	3.4	178
Total Responses:	34						



## For More Information



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