

## Program # 40032 - Lab, X-Ray, Medical Records and EMR

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Priority:Basic NeedsLead Agency:Health DepartmentProgram Offer Type:SupportProgram Contact:BELCOURT Joy

**Related Programs:** 

**Program Characteristics:** 

## **Executive Summary**

Lab, X-ray, and Medical Records Management provide essential clinical support to health delivery and emergency preparedness programs in the Health Department. Implementation of an Electronic Medical Records (EMR) system in the MCHD primary health care clinics, HIV clinic, school based and specialty health clinics and community health services sites is the third phase of the Health Department's clinical technology infrastructure plan. Continued roll-out in Integrated Clinical Services and Community Health Services is funded by a unique collaboration of public and private entities.

## **Program Description**

Laboratory: Test clinical and environmental specimens, manage contracts, prepare for bio-terrorism and emergencies and surveillance of emerging infections. X-ray: Maintain diagnostic imaging and film archive. Medical Records Management: Manage medical records systems to ensure comprehensive clinical documentation and compliance with all applicable licensing, regulatory and accreditation standards; continue implementation of electronic medical records; oversee HIPAA requirements for Health Department. Electronic Medical Records: The EMR implementation is a collaboration with the Oregon Community Health Information Network (OCHIN). This partnership allows us to spend less money on a high quality EMR system. The three-year implementation cost is estimated at \$4.2 million and is being funded through OCHIN, CareOregon, State, Federal, and clinical resources. It also supports the county's plan to transition off the mainframe system.

## **Program Justification**

The Clinical Infrastructure Services Group provides essential support to the health delivery and emergency preparedness programs within the Health Department. Laboratory and X-ray assist in the diagnosis, treatment, and monitoring of clients receiving health care in Health Department facilities. Medical Records Management ensures proper documentation of health care services and provides direction and monitoring of HIPAA compliance activities (federally required). Electronic medical records provide data to address the problem of access to health care for uninsured and under-insured residents. The integration of the three phases of the information technology initiative (county SAP, OCHIN's EPIC practice management system, and EMR) supports the Health Department's goals to reduce costs and improve care while facing a future of limited resources.

#### **Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY05-06)	Current Year Purchased (FY06-07)	Current Year Estimate (FY06-07)	Next Year Offer (FY07-08)
Output	Number of documentation audits completed	800	1,920	2,000	2,480
Outcome	X-rays taken	6,183	9,400	7,200	7,600
Outcome	Number of laboratory specimens handled	173,500	170,000	174,100	185,000
Output	Number of clinics with fully implemented EMR	2	3	3	3

# **Performance Measure - Description**

- 1) Number of laboratory specimens handled
- 2) Number of x-rays taken
- 3) Number of documentation audits completed
- 4) Note: the clinics already up on EMR are showing marked reduction in the amount of time a client spends on a clinic visit, due to streamlining of the various clinical processes such as lab and pharmacy. It is expected that this improvement will be replicated in the remaining clinic roll-outs. Also, bills are being posted and sent out for claims in half the time compared to pre-EMR data. Numerous areas of performance improvement data are being tracked during the three-year roll-out of phase 3.

#### **Legal/Contractual Obligation**

Federal and state mandates require maintenance of medical records. HIPAA and state confidentiality and privacy laws require adherence to standards. Various grants require provision of laboratory and x-ray services.

The EMR contractual obligations will be as per the agreement between Multnomah County Health Department (MCHD) and OCHIN for the implementation of the Electronic Medical Record at MCHD. Multnomah County Health Department is the client receiving services from OCHIN in this agreement.

#### Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds	
Program Expenses	2007	2007	2008	2008	
Personnel	\$360,193	\$1,178,077	\$1,599,686	\$0	
Contracts	\$9,515	\$20,000	\$29,900	\$0	
Materials & Supplies	\$1,138,506	\$157,990	\$980,893	\$0	
Internal Services	\$60,747	\$136,777	\$218,095	\$0	
Capital Outlay	\$10,550	\$49,450	\$10,000	\$0	
Subtotal: Direct Exps:	\$1,579,511	\$1,542,294	\$2,838,574	\$0	
Administration	\$53,651	\$0	\$48,187	\$0	
Program Support	\$0	\$0	\$0	\$0	
Subtotal: Other Exps:	\$53,651	\$0	\$48,187	\$0	
Total GF/non-GF:	\$1,633,162	\$1,542,294	\$2,886,761	\$0	
Program Total:	\$3,175,456		\$2,886,761		
Program FTE	4.16	14.34	19.30	0.00	
Program Revenues					
Fees, Permits & Charges	\$0	\$1,009,547	\$0	\$0	
Intergovernmental	\$0	\$532,746	\$0	\$0	
Program Revenue for Admin	\$0	\$0	\$0	\$0	
Total Revenue:	\$0	\$1,542,293	\$0	\$0	

## **Explanation of Revenues**

Revenue for laboratory and x-ray services are included in medical visit revenue. It is a reflection of medical visits and payor mix. General fund is used to pay for services to the uninsured clients served by the Health Department as well as deliver mandated public health services.

The EMR implementation will be funded through OCHIN, Care Oregon, State, Federal and Clinical resources and grants from organizations such as North West Health Foundation.

### Significant Program Changes

#### Last year this program was:

Last year this program offer was #40012 Lab, X-ray, Medical Records and #40015 Quality Assurance and EMR. By the end of FY07 the EMR will have been successfully implemented in all Primary Care and School Based Health Clinic sites.

Note: Last year extra revenue from the clinics was used to cover expenses in this program, but that will not be case for FY08. This change is reflected in the complete drop of other funds for FY08.