EMR Optimization in Health Care

**Educational Briefing for Non-IT Executives**

**Executive Summary**

The EHR Incentive Programs—otherwise known as Meaningful Use (MU)—have pushed health care organizations (HCOs) to pursue large-scale electronic medical record (EMR) implementations in short timeframes. This urgency adds a level of difficulty, as EMR implementations are never a seamless process due to the amount of planning, organizing, resources, time, and cost required. Organizations can be frustrated when they don’t see immediate EMR benefits if they do not understand that “go live” is the beginning of an extended period that requires changing the EMR’s configuration and use. This period is known as “optimization,” and is essential to realizing the benefits of an EMR investment.

**What is EMR Optimization?**

Advanced system functionality does not instantly produce the desired benefits that organizations look for when they implement an EMR. Many EMRs today have been implemented with basic “out-of-the-box” functionality, using a “big bang approach” in which all parts of the system go live at once. All HCOs eventually realize that after the initial implementation and stabilization comes a long configuration period during which the EMR has to substantially change in a variety of ways. These changes are referred to as “optimization.” HCOs have differing definitions of optimization, as summarized below. Starting at the bottom of the pyramid, many HCOs think of EMR optimization very tactically as “what happens after go-live” (e.g., redeploying IT staff). Others have a technical focus on enhancing system design and adding functionality that was not part of the original build (e.g., interfaces, forms design, device integration). Still others are focused on usability, workflow, or process changes to drive increased use of the system (e.g., adding devices, enhanced training, reducing “clicks”), or to standardize clinical and operational processes. At the top of the pyramid are pioneers in EMR value realization: HCOs that drive innovation beyond go-live to achieve measurable improvements in strategic outcomes.

**How HCOs Define EMR Optimization**

- “We are now working on…how to intervene before bad things happen to patients.”
- “We expected benefits; some were realized quickly, some not until long after implementation, and unexpected benefits have emerged.”
- “Driving clinical use by optimizing workflow”
- “Standardization of processes across our multi-hospital enterprise”
- “Improving system design”
- “Adding functionality that was not part of the initial build”
- “What happens after go-live”
- “Figuring out what to do with IT staff after the EMR implementation”

**Why is it important?**

EMR optimization goes beyond the initial design to make EMRs easier to use and more effective over time. EMR optimization provides a link between system functionality, process changes, and expected future benefits that affords HCOs an opportunity to achieve measurable outcomes and long-term business value.
How is EMR Optimization used or applied in health care?

Optimization is an important process not only for those yet to implement an EMR, but also for HCOs currently in the trenches of an implementation. HCOs may ask themselves, “Why did we invest so much money in an EMR without a plan to get measurable value from it?” Optimization provides a structure for HCOs to pull themselves out of the implementation rut, and focus on the long-term value an EMR provides. It is common for organizations to get “stuck” in their optimization process and spend more time focused on technical enhancements and process improvements than on actions that propel them toward strategic benefits. As the technology stabilizes and users become familiar with and comfortable using the EMR, HCOs can find themselves “unstuck” when the focus shifts to optimize the EMR to achieve strategic outcomes, as illustrated in the graphic below.

How does EMR Optimization affect health care providers and IT leaders?

EMR optimization efforts involve significant clinical and business process changes that require coordination from groups with different interests. The heaviest lift lies with executive teams and managers over the impacted areas that require the most change. IT leaders can help educate other senior executives about the optimization process in a few different ways. They can help build a common vision about the need to derive strategic benefits from the EMR, and facilitate the benefits realization process by helping organize the improvement effort and governance structure. IT leaders should participate in governance processes, help budget for outside expert advice, connect with vendors, contribute knowledgeable staff, build internal staff capabilities, and hold staff accountable for innovation. But ultimately, EMR optimization is a business imperative and cannot be viewed solely as an IT initiative—it must be approached as a team goal and project.

Questions That Hospital Executives Should Ask Themselves

1. What is our organization’s definition of EMR Optimization?
2. How have we formally agreed upon the desired benefits we want from our EMR?
3. How do we move beyond tactical and technical enhancements to outcomes optimization?

Additional Advisory Board research and support available

**Briefing:** EMR Enhancement and Optimization, Part 1

**Briefing:** EMR Enhancement and Optimization, Part 2

Source: Health Care IT Advisor research and analysis.