



# EHR BULLETIN

**SEPTEMBER 12, 2008**

Jeffrey Lasker, MD, CEO/CMO, New England Quality Care Alliance  
Eric Beyer, CEO, Tufts Medical Center Physician Organization

## **EHR Project – Core Workgroup**

George Beauregard, DO  
*Chairman*  
NEQCA

Eric Beyer  
*Chief Executive Officer*  
Tufts MCPO

Ted Bukowski  
*Chief Financial Officer*  
Tufts MCPO

Betsey Eltonhead  
*Chief Operating Officer*  
NEQCA

Jeffrey Lasker, MD  
*Chief Executive Officer/  
Chief Medical Officer*  
NEQCA

Robin Mael  
*Mgr, Project Implementation*  
NEQCA

Paul Quigley  
*EHR Program Director*  
NEQCA

Lisa Reed  
*EHR Project Manager*  
NEQCA

Bill Shickolovich  
*Chief Information Officer*  
Tufts Medical Center

Mark Singh, MD  
*IT Committee Chairman*  
NEQCA

Craig Williams  
*Sr VP Medicine/Operations*  
Tufts MCPO

## **Hardware/IT Vendor for the EHR Implementation**

The EHR Project Team has experience implementing clinical applications across a wide range of different health systems and has interviewed Executives leading EHR implementations across MA. In the course of those experiences and discussions we've examined the support call volume and the major reasons for the user's calls for support. There is a direct correlation between hardware issues and support calls. The data in one EHR implementation showed that more than 50% of the calls were related to hardware issues. Deeper analysis of these problems showed that variations in the hardware configuration (different hardware configurations within the same office, outdated hardware for the application (insufficient memory and outdated CPUs were the highest issues), and different hardware configurations across offices) increased the overall support costs and decreased response time to problem resolution. Incompatible or mixed hardware also increases the level of practice frustration when learning to use a new application. To reduce these risks the EHR Project Team is strongly recommending the network use a single preferred Hardware/IT (HW/IT) Vendor for the EHR implementation. This gives the practices the best balance of economic benefit of group purchasing and standard configuration.

First, we would like to define the HW/IT Vendor's role in the EHR implementation process:

- To work with NEQCA EHR Team to perform an initial onsite practice assessment. The purpose of this site assessment is to determine what specific hardware (PC's, laptops, scanners, etc.) can be used in the EHR implementation and what specific hardware needs to be purchased by the practice. This assessment will also evaluate the practice's internet connection to be sure it meets minimum requirements. It is important to note that we will try to use whatever hardware you already have in the practice but it must meet the minimum standards.
- Will be responsible for ordering the equipment, installation, and testing that it is working properly.
- Once a practice is Live on eClinicalWorks (eCW), that same HW/IT Vendor will be the one who will work with the practice to fix any issues that arise with the hardware.

This single HW/IT Vendor will simplify the entire support model for all NEQCA practices- those going through implementations and those already "Live". The support plan is to have one phone number for all practices to call with any issues that arise. The person answering that phone will be able to triage the issue and assign it to the appropriate person. When there is a single network HW/IT Vendor, that process is streamlined because there is only one Vendor to follow up with instead of multiple vendors across the network. This ultimately reduces response time and translates into keeping the practice's support costs as low as possible while still providing a high level of support.