

FEATURES

Right-away RIS

Elizabethtown (Ky.) Diagnostic Imaging shares its experience with implementing electronic patient data transfer and storage.

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In a cutting-edge business, it is important for medical practices everywhere-no matter what niche-to embrace electronic patient data transfer and storage. Radiology practices are no exception, but it isn't enough to select any Radiology Information System (RIS) at random. Implementing a system that is as intuitive as it is dynamic is crucial to making an imaging practice operational and ensuring its success.

In October 2007, Elizabethtown Diagnostic Imaging was set to open its doors. We had everything in place, including a billing and scheduling software that the parent company of our practice had requested we utilize. The day prior to the opening, the entire staff gathered in a basement at the home of one of our physician owners for a training session on how to use the new software. About fifteen minutes in, it was clear that the platform wasn't going to work. The physician pulled me aside and confirmed our fears.



It was the day before the opening, we thought we were completely prepared-and, suddenly, we had no data management system.

Luckily, I'd worked with an intuitive, multifunctional system in the past that I recommended in the first place: MedInformatix. We called them up to get their RIS system implemented last minute, and they sent a training representative and fifteen workstations to Elizabethtown within 24 hours. One 30-minute training session later, our team was ready and comfortable using the software.

RIS and General Efficiency

The new radiology information system (RIS) is an end-to-end practice management package that accommodates the needs of both small and large radiology centers. The system is bi-directional with other key software applications including dictation and PACS, and can be customized to meet the particular workflow and business rules of individual practices.

For Elizabethtown Diagnostic Imaging, we rolled out almost the entire suite of modules, including scheduling, registration, technologist and radiologist workflows, EDI, and custom reporting.

The scheduling and registration modules gives us the ability to leverage scheduling templates, appointment reasons, alerts, and automatic authorization requests from an easy to use and customizable software package. Registration is simple and usually only takes a minute or two to complete. Scanning and uploading documents like insurance cards and prescriptions is a one-click process that takes only seconds.

Tailored workflows allow all departments including the technologists and radiologists to view prescriptions, review screening forms, and send specific encounter notes or general center wide messages to other staff members. Radiologists can instantly access allergy and exam histories, as well as relevant patient visit data. The workflows are customizable by departments and designed to meet the specific needs of our center.

A complete EDI billing package includes electronic claims and statements, claims status, and automatic remittance posting. Everything is modified to meet the practice's needs.

A big draw for RIS implementations is the elimination of paper and data collection. Eliminating costs on paper and ink are huge benefits. Plus, storing data on our servers replaces cumbersome manual transfers, and the physical storage requirements of filing. Effective RIS packages are also compatible with a variety of third-party systems for integration of PACS products that support digital dictation, transcription and mammography tracking. This keeps data collected by other systems centralized, eliminating the need to import the information into the RIS.

Benefits: Exceeding RBMA Industry Standards

With the new RIS, Elizabethtown Diagnostic Imaging has been able to surpass every standard performance marker set by the Radiology Business Management Association (RBMA). Our accounts receivable days are almost half the national average, and our net collection rate beats the typical practice by close to four percent.

Due to our system's integration capabilities, we have continued using voice transcription-saving time that might be otherwise spent manually importing information into the RIS. The configuration allows us to automatically launch the voice transcription for quick physician reporting. The transfer of reports and data between our practice and other physicians is secure, quick, and efficient. In fact, transmitting results to referring physicians usually occurs 30 minutes to two hours following the patient visit.

Storing the data electronically makes analysis simple. We stay abreast of key performance indicators by generating reports compiled by the RIS that we can easily export to Microsoft Excel for simple analysis and sharing.

Two years later, our RIS continues to contribute to the general efficiency of our day-to-day processes. The system is scalable and has easily handled the growth of the practice.

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