



Case Study

PROBLEM

New specialty practice needed to identify an EHR that:

- Was easy to learn and use
- Could be uniquely customized for each provider
- Had unified clinical and business systems

PURCHASE FACTORS

The practice noted:

- Truly integrated EHR and PM functions
- Easily adaptable
- Intuitive
- Reasonably priced

RESULTS

- Quicker patient visits
- Software eases new patient account setup and scheduling
- Easy integration with billing partner

Boise Kidney and Hypertension Institute

Nephrologists Dr. Amit Sharma, Dr. Arnold Silva and Dr. Mary Dittrich understood that the gap between traditional nephrology practices and large dialysis centers was preventing patients from getting the best possible care. “We’ve been working on a project to bridge a medical practice with dialysis, hoping to improve kidney disease management,” says Dr. Sharma, the managing partner, chief executive officer and director of Clinical Research at Boise Kidney & Hypertension Institute.

The doctors’ goal was to improve patient care by offering a complete medical practice and a dialysis center under the same roof. So when they were given the opportunity to open a practice and partner with Liberty Dialysis, they took it.

NEW PRACTICE MODEL, NEW APPROACH TO MEDICAL RECORDS

With a new practice model in the plans, the physicians also began looking for software that could bridge electronic health records (EHR) and practice management (PM) systems. Dr. Sharma wouldn’t accept the traditional gap between EHR and PM systems. He understood that, in order for practices to keep up with changing industry and payer requirements, practices must have integrated financial and clinical data.

All three physicians had previously worked with EHR systems—enough to know that they wanted to start this practice with something more intuitive. They were looking for a system that was adaptable and less complex than those they had experienced, most notably from the big-name offerings, whose software was rooted in older technology.

After studying numerous systems, large and small, well-known and less so, Dr. Sharma selected Aprima, which offers EHR and PM functions in one database instead of two.

Boise Kidney also selected Aprima because of its reputation for providing client practices

with superior support. “The Aprima team has a rich history and a commitment to meet our personal needs, to adapt as the technology landscape changes.”

Dr. Sharma insisted on a Microsoft-based EHR that would be easy to support and integrate with other software, from Microsoft® Word to specialty medical applications. Aprima’s EHR/PM solution is built on Microsoft SQL Server, with a wireless network and VPN connections.

A SINGLE APPLICATION BUILT ON A SINGLE DATABASE

The integrated Aprima EHR/PM solution begins making a difference for Boise Kidney from a patient’s first phone call. Instead of the receptionist navigating through multiple windows and systems to set up the patient’s demographic record, create a chart, and then set an appointment, all of this can be done simultaneously.

Dr. Sharma explains that everyday tasks like setting appointments, scheduling, coding, appealing insurance denials and creating reports are fast and easy because Aprima integrates scheduling, clinical records, billing and reporting.

“The Aprima solution makes patient visits a lot easier. Clinic visits are faster—from 25 minutes to 10.”

Dr. Amit Sharma, M.D.,
FACP, FASN
Boise Kidney &
Hypertension
Institute

Practice Profile

BOISE KIDNEY & HYPERTENSION INSTITUTE

Boise Kidney & Hypertension Institute specializes in the early diagnosis, treatment and care of patients at risk for, or suffering from, chronic kidney disease and hypertension. The mission of Boise Kidney is to provide the most comprehensive, advanced and compassionate care for kidney disease patients in the Southern Idaho Region—“We Make Lives Better in Idaho.”

Three nephrologists opened the practice in early 2006 in partnership with Liberty Dialysis. The medical practice and dialysis center operate in the same building.

As an affiliate of Liberty Dialysis, Boise Kidney offers its patients state-of-the-art care in comfortable, contemporary facilities. In addition, trials are under way in anemia management, hypertension control, reno-protective strategies and home dialysis.

Read more about Boise Kidney & Hypertension Institute at boisekidney.com.



MODIFYING COMMON PROBLEM PALETTE

Boise physicians add common diagnoses to their pick list—no programming required!

For established patients, the integration of the schedule and chart enables Aprima to display health-maintenance reminders or make sure that necessary lab work has been completed before a patient’s appointment.

EFFICIENCIES WITH YOUR BILLING PARTNER, TOO

Even though the doctors at Boise Kidney wanted a single clinical and financial solution, they didn’t want to do their own billing. So, they hired a company to manage their billing and collections. That company—Health Care Strategies (HCS)—is an authorized Aprima reseller.

HCS uses a VPN connection to manage billing directly from Boise Kidney’s server. After the doctors finish each chart, Aprima creates an E&M summary that calculates points and suggests a visit level. Doctors can confirm, upcode or downcode as appropriate. When they complete this step, Aprima creates a superbill with the appropriate allowed charges for each payer.

HCS checks the superbills to ensure that they’re complete. This includes balancing and closing to post the charges to the appropriate accounts (a one-click task), processing the claims and submitting them electronically. Any incomplete visits are put on a “custom hold” so that Boise Kidney can review and provide the missing information. No paper is required. Payments go directly to Boise Kidney’s office. The practice makes deposits and sends HCS the EOB forms to credit the correct accounts.

Margaret White of HCS says, “We really appreciate the Aprima system. Having all the information in one record makes our job much easier. For example, images of things like the insurance card and driver’s license are right there, so if we get an error message from a payer, we can make the correction without having to call the practice and ask them to pull the file. Aprima also makes it easier to respond to denials; if the payer says a diagnosis code doesn’t match the CPT code, we can look at the clinical note and respond immediately. Aprima saves us a lot of telephone calls and a lot of hours.”

THE EXAM ROOM STRATEGIC ADVANTAGE

The proof of any EHR is in the exam room, and that’s where Aprima really shines. Physicians understand that EHRs should make it easier and faster for them to provide excellent, proactive care for their patients.



APRIMA IS INDIVIDUALITY

Our EHR/PM is a single application built on a single database, which means that users can move around in the system without having to close one database and open another. This innovative design eliminates unnecessary complexity.

Unfortunately, some practices, “wind up in a chase to be more efficient,” says Dr. Sharma, and get an EHR system that is slower and clumsier than paper.

Dr. Sharma says that Aprima has given his practice an edge in both the front end and the back end. Aprima’s adaptive learning and intelligent navigation dramatically reduce the time the doctors spend hunting for the right screen or menu option, he adds. These capabilities speed the doctors’ charting process by conforming to the way they practice medicine.

The Aprima adaptive learning technology assesses how physicians practice and adapts accordingly. This allows physicians to provide more standardized care while preserving individual flexibility. For example, the software displays each of Boise Kidney’s three doctors’ most common diagnoses and medications at the top of their individual pick list. The physicians can even create their own palettes of associated chief complaint, history of present illness, diagnosis and treatment plan to make documentation faster and easier than with paper, dictation or other clinical systems.

Intelligent navigation automatically displays the options relevant to each chief complaint. See a symptom that’s not on the list? The doctors can add it on the fly, in just seconds.

Available through