

# Study links electronic health records to improved quality in primary care treatment

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Routine use of electronic health records may improve the quality of care provided in community-based primary care practices more than other common strategies intended to raise the quality of medical care, according to a new study by RAND Corporation researchers.

Studying 305 groups of [primary care physicians](#) in Massachusetts, researchers found that practices that used multifunctional [electronic health records](#) were more likely to deliver better care for diabetes and provide certain health screenings than those that did not.

While quality differences discovered in the study were modest in size, the study is one of the first to demonstrate a link between use of electronic health records in community-based medical practices and higher quality care. The findings are published in the Oct. 6 edition of the [Annals of Internal Medicine](#).

"Overall, we were surprised by how few strategies to improve the quality of care were linked to measurably better performance," said Dr. Mark W. Friedberg, the study's lead author and an associate natural scientist at RAND, a nonprofit research organization. "The strategy that showed the most impact was use of advanced electronic health records."

Electronic health record systems were linked to higher quality care when the systems included advanced functions such as electronic reminders to physicians, and if the systems were used routinely by a medical practice.

Studies by RAND Health and other groups have documented problems with the quality of health care in the United States, including gaps in the delivery of preventive and chronic disease care.

To address these shortcomings, primary care physician practices are encouraged to invest in many types of structural changes intended to foster improved quality. These include giving physicians feedback on their performance, sending reminders to physicians and patients about needed services, having language interpreter services, offering appointments on evenings and weekends, and adopting electronic health records.

Researchers were able to examine whether such strategies could be linked to higher quality of care by making use of a unique set of information about physician practices collected by the Massachusetts Health Quality Partners.

Researchers surveyed 305 medical practices in 2007 to assess whether they had put into place any of 13 structural capabilities that are aimed at increasing the quality of medical care. That information was linked to the results reported by each practice for 13 commonly used measures of quality in four clinical areas -- diabetes treatment, depression care, overuse of medical technology and common health screenings.

Primary care medical practices that used multifunctional electronic health records performed better on five of the quality measures -- two involving diabetes care and screenings for breast cancer, colorectal cancer, and chlamydia.

Medical practice groups that had frequent meetings to discuss quality reported better results for three measures of diabetes care. Practices that reported high physician awareness of patient experience ratings reported higher performance on screenings for breast and cervical cancer. No

other structural capabilities were associated with more than one measure of quality, and no capabilities were associated with better performance on depression care or overuse of services.

Researchers say their findings are relevant to ongoing discussions about the potential benefits of broadly adopting electronic health records across the nation's health care system. Recent federal legislation has called for new incentives for physicians who make "meaningful use" of the technology.

"Electronic health records with advanced features are uncommon nationally," Friedberg said. "Our results suggest that increasing their adoption may help improve the quality of care in important areas of preventive care and chronic disease management."

The study also has implications for "medical home" demonstration projects -- ongoing efforts to improve the quality of medical care by investing in the capabilities of primary care practice groups. Researchers say their study's findings may help guide expectations about the magnitude of quality improvements that may be possible from these investments.

Source: RAND Corporation

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