

## Push for better ways to share e-health records

October 25 2010, By LAURAN NEERGAARD, AP Medical Writer

(AP) -- Think you entered the digital health age when your doctor switched from paper charts to computerized medical records? Think again: An e-chart stored in one doctor's computer too often can't be read by another's across town.

Now the country's largest network for paperless prescribing is poised to help tackle that hurdle. Surescripts is expanding so that doctors around the country can choose to share medical reports, X-rays and other health data over its network much as they send e-prescriptions to drugstores today, regardless of what competing brand of computerized health records they use.

"What doctors would like to do is share comprehensive information with each other - give me the whole file as opposed to writing me a note," says Surescripts executive vice president Cris Ross. "No other industry would stand for that level of clumsy communication."

With 200,000 doctors already using Surescripts for e-prescribing, the move is among the largest of a growing number of efforts to connect electronic medical records - including work to link Veterans Affairs hospitals with private physicians in certain cities, and half a dozen soon-to-start pilot projects in a government-industry partnership.

And that push comes just as doctors and hospitals are scrambling to qualify for some of the billions in federal money available starting next year to help defray the costs of investing in e-health, if they meet



requirements that include being able to share some records.

"What we're trying to do is modernize the way in which physicians communicate," says Dr. Doug Fridsma, who directs the Department of Health and Human Services' work to make <u>electronic medical records</u>, or EMRs, become "interoperable" - meaning doctors can share and view them from anywhere.

About 20 percent of doctors are estimated to use some form of EMR today, but those who can share records electronically tend to be members of the same large health system. Unless patients drag paper copies from doctor to doctor, competing physicians have to share records with each other by fax, which is time-consuming and often incomplete or even skipped altogether.

"I need access to critical decision-making information immediately," says Dr. Simeon Schwartz of Westmed Medical Group, an oncologist in Westchester, N.Y., who uses EMRs and plans to try Surescripts' new records-sharing service in hopes of easing problems getting health information from doctors outside his large multispecialty practice.

Just last week, a patient who received experimental therapy for prostate cancer at a nearby health center returned to Schwartz for follow-up care without being given any documents showing what the treatment had entailed. Schwartz had to ask the hospital to fax the records - and three days later was still waiting.

To help, the government and industry created standards for forming secure Internet-based networks so that competing health organizations could exchange patient information. The ultimate goal - nowhere near reality yet - is a network of networks that easily connects computerized health records, similar to how people call each other's cell phones without even knowing that one uses Verizon and the other AT&T,



## Fridsma explains.

Programs to start testing how the interoperability standards work are beginning:

- -Surescripts' version, set for early next year, will offer a variety of choices depending on doctors' e-health sophistication, Ross says. An individual physician may subscribe to a portal to send patient information to a specialist. Or existing EMR vendors or information networks might sign up to use Surescripts as a gateway to link with outside doctors whose computer systems otherwise would be incompatible.
- -Veterans Affairs medical centers pioneered computerized <u>health</u> <u>records</u> but can't exchange information with the private physicians most veterans also see, leading to incomplete charts. So the VA is pilot-testing electronic record sharing with private physicians in certain communities, including San Diego and southeastern Virginia.
- -To see how easily providers can switch from faxing to electronic sharing of simple information like lab test results or health summaries needed for referral to a specialist pilot tests under the government-industry partnership known as the National Health Information Network's Direct Project begin later this fall in California, Tennessee, Connecticut, New York and Rhode Island.

HHS officials wouldn't comment specifically on the Surescripts program, but say there's no one-size-fits-all solution to the challenge of exchanging these complicated records.

"There's a rich ecosystem of innovation that's out there," says Fridsma. "We just want that information to be accessible."



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