

# Customer Profile

Medical and Practice Management



## Hancock Regional Hospital

Greenfield, Indiana

### *Vital Statistics*

Name:	Hancock Regional Hospital (& Hancock Physician Network)
Location:	Greenfield, Indiana (15 miles east of Indianapolis)
Hospital Size:	106 beds
Practices :	8 locations including primary care, internal medicine, pediatrics, pulmonary geriatrics and mental health
Care Region:	2 counties (Hancock and Marion)
Tax Status:	Non-profit
LSS Go-Lives:	Practice Management - July 2006 Electronic Health Record - May 2007

### *Selection Criteria*

Cost and integration were certainly central to Hancock Regional Hospital's selection of the Medical and Practice Management (MPM) Suite, says Donna McDaniel, CPC, CMPE and Practice Administrator at Hancock Physician Network. But it was their "commitment to the culture of MEDITECH and LSS" that made MPM the natural choice for their ambulatory EHR and Physician Practice Management solution. Hancock has been utilizing MEDITECH's Health Care Information System since 1995, implementing LSS's Practice Management system in July 2006 and Electronic Health Record in May 2007. "MPM fits in perfectly with our EHR strategy," says McDaniel. "The product is easy to train on and easy to adapt to multiple specialties."

### *Financial Benefits*

McDaniel recalled her organization's experience with their previous physician billing software. Every time they took an update they would feel the impact on their revenue stream. "With LSS we've seen a steady monthly decline in AR aging, with no hills and valleys with our upgrades." Looking back at it, she characterizes the overall effect on revenue flow as "dramatic."

Additional benefits on the administrative side of their practices include improved information sharing with the hospital, particularly during registration. "Registration was the biggest key," says McDaniel. "Patients are seen much more frequently in the practices, and the flow of demographic data means the hospital has much more up-to-date information."

And one of the biggest cross-over processes that has yielded both clinical and financial ben-

### **Executive Summary**

Hancock Memorial Hospital was built in 1951 on land donated by Mrs. Fannie Andis. Renamed Hancock Regional Hospital in 2005, HRH provides Hancock County and the surrounding community with the services of a full-service community hospital, including a state-of-the-art surgery department, 24-hour emergency services, OB services, progressive and critical care, gero-psych unit, home healthcare, occupational health, a transitional care unit, a total oncology program and a full compliment of inpatient and outpatient services. HRH also operates Hancock Wellness, LLC., a health and fitness facility that moves beyond the traditional "health club" model to cover the five dimensions of wellness, providing a complete health regimen.

Hancock Physician Network is a primary care network of physicians that practice throughout Hancock and Marion Counties. The network of over 30 physicians provides care in the specialties of Internal Medicine, Pediatrics, Family Practice, Pulmonary Medicine, and Mental Health. Together, Hancock Regional Hospital and Hancock Physician Network provide a wider range of programs and services than most community-based health systems of their size.

efits is coding compliance. McDaniel reports that Hancock's physicians find it "so much easier to keep track of" requirements for E & M coding using MPM. As a result, physicians are adhering to recommended guidelines and reaping the rewards of fuller reimbursement.

### ***Clinical Benefits***

Discussing her organization's implementation of the clinical components of the MPM Suite, McDaniel

recalls their initially conservative approach. "We cut physician schedules in half for the first week, but by day two they were asking to go back to 100%." And this is in the context of a 5% annual increase in patient volume.

Ease of use and flexible documentation options have helped make this possible. Hancock providers use a mix of standard and customizable documentation templates, dictation and transcription, and voice recognition. "The physicians using Dragon (Dragon Naturally Speaking) love it and consider it vital to their success," says McDaniel. "But most of them use a little bit of everything — templates, canned text . . . all options."

Prescribing is another clinical process that Hancock's providers find much improved. "Prescription writing has been a huge benefit and time saver," says McDaniel. "The ordering of ancillary tests at our hospital is paperless, which saves on phone calls and streamlines the entire process." Administrative staff report a significant reduction in phone calls from pharmacies with questions about prescriptions.

Currently Hancock providers are ordering electronically and auto-faxing prescriptions, but they're well into the process of implementing LSS's integrated e-Prescribing solution developed with DrFirst. "The pharmacies are very pleased with the current process and excited that we're implementing e-Prescribing," says McDaniel.

MPM's Health Maintenance and Disease Management tools have led to additional clinical process improvements

that positively impact both patient care and revenue. "Health Maintenance and Disease Management alerts really help remind physicians of upcoming preventive care items," says McDaniel, explaining that Hancock has a steering committee of experts in each specialty to oversee the set up of appropriate reminders in their areas of expertise. This kind of collaboration between clinical experts and IT staff has helped providers at Hancock maintain a high level of confidence in the software and their use of it.

### ***The Future***

Looking forward, McDaniel says they want to keep up the kind of positive momentum that landed HRH on Hospitals & Health Network's list of Most Wired hospitals in 2008. They plan to do so by completing their implementation of MPM's e-Prescribing functionality, launching the LSS Patient Portal (which provides patient access to portions of their medical record and billing information) and preparing for their migration to the 6.0 platform for both MEDITECH and LSS applications.

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**Donna McDaniel**  
CPC, CMPE  
Practice Administrator  
Hancock Physician Network