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Progress Notes

As you all know, we continue to live in two different EMRs (electronic medical records). Five of our clinical departments are using Centricity, while a large portion of our team has moved to HealthSpan. Through UHS, we have engaged some consultants from a firm called Ingenix to build out the required elements to move the remaining five departments to HealthSpan. The projected timeline for completing that is July 2013.

In the meantime, all of you continue to endure the hassle of using two different EMRs to do your work. If you are on Centricity, many of you need to check HealthSpan frequently for clinical notes from consultants in Internal Medicine, or Firetower Medical Office, or Cardiovascular Sciences. If you are on HealthSpan, then you may have to look up the notes from a primary care provider in Centricity, or check your patient's older records on that system. Adding to this burden are the problems created by lab results not consistently showing up in Centricity, even though they are in HealthSpan. The team at Health Information Systems/Services is devoted to getting this lab reporting issue resolved and is working with ITCS and numerous others to do so.

So what stands in the way of bringing the remaining five departments (Family Medicine, Obstetrics & Gynecology, Pediatrics, Psychiatric Medicine, and Surgery) live on HealthSpan sooner than the summer of 2013? Isn't it really simple, now that all the work has been done to get the other clinics switched to HealthSpan? Unfortunately, not so. Each specialty and each clinic within that specialty requires attention to the unique aspects of their work, meaning we need to pay careful attention to each one. Although we are emphasizing that we want to standardize the EMR as much as possible, we do recognize that some amount of special tweaking is needed for each area.

In addition, we are working with these sorts of factors:

- Some clinics have a surge in patient visits during Cold and Flu Season. A change to a new EMR at that time would be especially hard.
- The arrival of new resident physicians in July each year adds its own twists.
- ECU Physicians must be compliant with the new federal ICD-10 coding and billing system by October 1, 2013. This system replaces the current ICD-9 system. We need to make sure we are ready for that.
- There are two ways to accelerate this rollout to the five departments. We can increase the consultant staff hired to build the EMR or we can increase the training staff hired to train all of our end users.
 - o Both approaches will create major increased expenses.
 - o We already project the cost to ECUP will be nearly \$3.2 million to rollout the EMR to these five departments. We need to consider the impact of adding major new expenses.
- The spring months are typically our best months for bringing in revenues for ECUP. If we move any or all of the departments to HealthSpan in the spring, it will have a major negative impact on the revenues due to decreased clinic volumes and due to backlog of charts.

All of these, and many other factors, will be considered as we look at the upside and the downside of accelerating this conversion. I know that either way there will likely be some folks who will be unhappy with the decision. We will do our best to reach a decision that has the best overall outcome for ECUP and our team members.

*Nicholas Benson, MD, MBA
Medical Director, ECU Physicians
Vice Dean*



Officials Cut Ribbon on New ECU Family Medicine Center

Three years almost to the day after a ground-breaking ceremony, East Carolina University officials cut the ribbon Friday on one of the university's most awaited new buildings: the new ECU Family Medicine Center.

The center has been open for patients for a few weeks, but Friday's ECU board of trustees meeting on the health sciences campus presented an opportunity to officially unveil the new building.

Touting its patient-care capacities and advanced features, Dr. Kenneth Steinweg, chair of family medicine at ECU, said, "There is none other for family medicine like this in the country."

The building replaces a cramped, outdated 32,000-square-foot facility that opened in the 1970s and was attached to Pitt County Memorial Hospital. The new center has educational and office space the former center lacked. It also includes space for sports medicine, physical therapy, geriatrics and more, which used to be housed at different sites.

Dr. Jim Jones, founding chair of family medicine, praised the new building, the university for pursuing it and the General Assembly for funding it.



ECU Officials gathered Sept. 23 to cut the ribbon on the university's new Family Medicine Center and Monk Geriatric Center. The new center replaces an outdated center that opened in the 1970s (Photos by Cliff Hollis)

"You can't persuade young medical students to go into family medicine if the facility they train in is second-rate," Jones said. "It's important students (know) they're going into a field of medicine that's respected and has the support of the university and the legislature."

The Frances J. and Robert T. Monk Sr. Geriatric Center, part of the Family Medicine Center, replaces an off-campus doctor's office that had four exam rooms. The Monks, who were patients of Steinweg's in that small office, wanted to support a new, modern facility for the care of elderly patients. They pledged \$2.5 million to help build it.

"They wanted to give back to the community that's given so much to them," Robert Monk III said of his late grandparents.

The day before the ribbon-cutting, third-year family medicine resident Dr. Daniel Becerra said patients seem to like the new center. "I had 13 patients scheduled and 14 show up," he said. "That's always good when you have more patients."

Becerra said the design of the new building, with large windows, also improves the experience for patients and staff, he said.

"Being able to see outside, see people walking, feel connected to the outside world make it feel less like a doctor's office," Becerra said. "I feel a little more connected to the world."

In addition, patients can park near the building, wait times have decreased, and services such as radiology and laboratory services are on site.

As the center attracts new patients, the diversity of people and their illnesses, injuries and conditions will also grow, adding to educational opportunities for medical students and residents, Becerra said.

"The training is just going to increase with an already highly respected program," Becerra said.

The new Family Medicine Center has 33 exam rooms in the main section with another 12 exam rooms in the geriatric center. It also has sports medicine, minor surgery, medical procedure and urgent care clinical areas. Administrative staff members also have offices at the center. Many previously worked in the Brody Medical Sciences Building.

Construction on the facility began in 2009. Building and equipping it cost approximately \$38.1 million, with more than \$36 million appropriated by the General Assembly. The Golden Leaf Foundation awarded \$1 million to help build the facility.

Word to the Wise

"I've learned that people will forge what you said, people will forget what you did, but they, but people will never forget how you made them feel."

- Maya Angelou

ECU Physicians Posts Positive Earnings



Brian Jowers

Aided by a cancer services joint-venture agreement with Pitt County Memorial Hospital, ECU Physicians turned a profit in fiscal year 2010-2011.

It was the first year since 2006-2007 that the practice made money. Expected approval of higher payment rates by Medicaid should help practice revenues exceed expenses in coming years.

In the fiscal year that ended June 30, ECU Physicians had operating revenue of \$158.8 million and operating expenses of \$167.9 million, executive director Brian Jowers told the health sciences committee of the ECU board of trustees last week.

But a \$17.9 million payment from PCMH as part of the cancer center joint venture agreement, plus another \$9 million in revenue shifts related to the Healthspan electronic medical record implementation and unfilled jobs, helped total revenues exceed expenses by \$17.5 million.

Even though operating revenues -- the money ECU Physicians makes providing direct patient care -- fell short of operating expenses by \$9 million, Jowers said the medical practice is close to balancing its budget.

"We would have come close to breaking even without the cancer center deal," Jowers said this week.

The practice is seeing more patients, improving its charging and bill collecting, and using better business practices, he said. "We've just had to tighten our belt."

ECU Physicians cash reserves sit at approximately 50 days. Jowers would like to have 180 days of cash set aside. That's the amount of money the practice would need to pay its bills if all revenue stopped.

Most department revenues are exceeding expenses, and Jowers' team is working with the ones that aren't to improve their finances.

Through the end of August, fiscal year 2011-2012 revenues are \$1 million below expenses. Another \$3.4 million ECU is owed for the cancer center joint venture will offset the deficit, Jowers said.

State approval of Medicaid upper payment limits will help revenues in coming years, Jowers said. Once approved, ECU will be reimbursed to July 1, 2010, and higher reimbursement rates will continue.

Medicaid is the federal-state health insurance program for the poor and children. The upper payment limit reimburses state medical school practice plans (ECU Physicians and UNC Physicians and Associates) that see significant numbers of Medicaid patients at rates closer to what commercial insurers pay.

Jowers said that the state Medicaid agency should have approval for the upper payment limit by the end of the month.

This article was written on October 3, 2011 and is online at <http://www.ecu.edu/cs-dhs/dhs/newsStory.cfm?ID=2107>.

*Contributed by Doug Boyd
ECU Health Sciences New Services*

HIPAA Security Awareness Tips

Federal HIPAA Regulations require we protect the confidentiality, integrity and availability of electronic protected health information (EPHI). Below are a few reminders that will assist you in protecting the security of EPHI.

1. Do not share your account or your password with Anyone (including supervisor, ITCS, etc.): All activities associated with your assigned user account are your responsibility and you will be held accountable for those activities.
2. Do not store EPHI outside of the medical record unless you are authorized and have implemented the appropriate security controls. Refer to the Workstation Security Policy on the HIPAA website at www.ecu.edu/HIPAA for authorization requirements.
3. Never store EPHI unencrypted on desktops or portable devices (i.e. laptops, flash drives, CDs). Refer to the Portable Device Security Policy on the HIPAA website at www.ecu.edu/HIPAA for requirements.
4. Never store EPHI on your home computer. If you need to access EPHI from home, use ECU's virtual private network (VPN) and access the EPHI from a secure server or Pirate Drive. Refer to the ITCS website at www.ecu.edu/ITCS for information on downloading the VPN software.
5. Learn your responsibilities by reading the HIPAA Acceptable Use Policies on the on the HIPAA website at www.ecu.edu/HIPAA.



Holiday Safety Tips

The holidays are a special and joyous time of year. It is also a time when individuals need to be alert to the possibility of crime. Simple precautions should be taken to ensure a happy and safe holiday.

Shopping Safety:

- Go shopping during daylight hours when at all possible. If you must shop in the evening, shop with a friend.
- Park in well-lighted areas, as close as possible to store entrances.
- Lock your car, close the windows and hide shopping bags and gifts in the trunk
- Carry your purse next to your body with the flap against you. Men should carry their wallets in a front or inside pocket.
- Carry a cell phone and have your local emergency numbers programmed into it.
- Avoid carrying large amounts of cash; pay with a check or credit card whenever possible.
- Stay alert and be aware of what is going on around you.
- When returning to your vehicle, have keys ready in hand, scan the area and look under and inside your vehicle before entering it.
- If you use an ATM, go during day light hours and in a well populated area.
- Teach children to go to a store clerk or security guard and ask for help if you become separated in a store or shopping mall.
- If you are going out for the evening turn on lights and a radio or a tv so it looks like someone is home.
- Keep your doors and windows locked and the blinds closed, even if you are only going out for a few minutes.
- Don't advertise what you got for Christmas by putting boxes outside your house. Break the boxes down or take them to the dump yourself.
- If you are going to be away for an extended period of time from your residence, have someone pick up your mail or contact the post office to stop delivery until you return.
- If you are a victim of crime report it to the police immediately.

ECU Pharmacy Reminders

ECU Pharmacy

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 Fax: (252) 744-1800
 E-mail: pharmacybrody@ecu.edu

Leo Jenkins Cancer Center Pharmacy

Phone: (252) 744-2426
 Fax: (252) 744-7554
 E-mail: pharmacyljcc@ecu.edu

Family Practice Center Pharmacy

Telephone: (252) 744-4680
 Fax: (252) 744-3804
 E-mail: pharmacyfpc@ecu.edu

Bernstein Center Pharmacy

Phone: (252) 413-0063
 Fax: (252) 413-0646
 E-mail: pharmacybernstein@ecu.edu



Pharmacy Prescription Refill Request

You may now submit your prescription refill requests using the online form. Just go to the following website:
<https://www.ecu.edu/cs-dhs/grouppractice/prescriptionrefill.cfm>

ECU Employees Discounted Prescription Formulary List

<https://www.ecu.edu/cs-dhs/ecuphysicians/patient-care/upload/DiscPrescriptions.pdf>

Delivery Registration Form

<https://www.ecu.edu/cs-dhs/grouppractice/customcf/PharmacyDelivery.pdf>



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