

## Clinical Automation in the Physician Office

### FOCUS: e-Prescribing/Ambulatory EMR 2005

As clinician awareness of the benefits of using computers (as a tool to reduce medical errors) increases, more physician offices are looking at an e-Prescribing/Ambulatory EMR strategy. The purpose of this study (March 2005) was twofold: (1) to assess market perception of the e-Prescribing/Ambulatory EMR products offered as identified by survey participants and (2) to identify key decision factors used by survey participants when choosing an e-Prescribing/Ambulatory EMR vendor.

A specific six-question “Market Perception” survey was developed. The first two questions were aimed at understanding whether an organization had an e-Prescribing/Ambulatory EMR strategy, and if so, what vendor was chosen or would be considered. The next two questions looked at key drivers in vendor selection or future selection. The fifth question asked “If you could start fresh today, what vendors would you look at?” And lastly, question six had eight components and sought an assessment, on a scale of one to five (very weak to very strong), for each vendor product offering in the following categories:

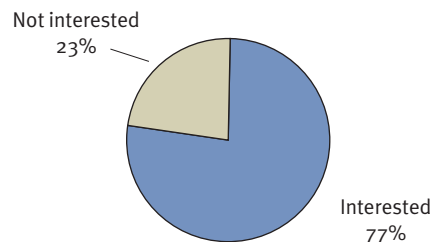
- Vendor Vision
- Ability to Deliver Product
- Physician Acceptance
- Clinical Decision Support (Alerts, Reminders)
- End User Presentation
- Cost/Value
- Technology/Architecture
- Integration

Of the eight categories rated, the “ability to deliver product” was the highest-rated area among all the vendors, while “cost/value” was the lowest. Comments were sought for answers to all questions, so as to better understand each individual answer and the rating of any category.

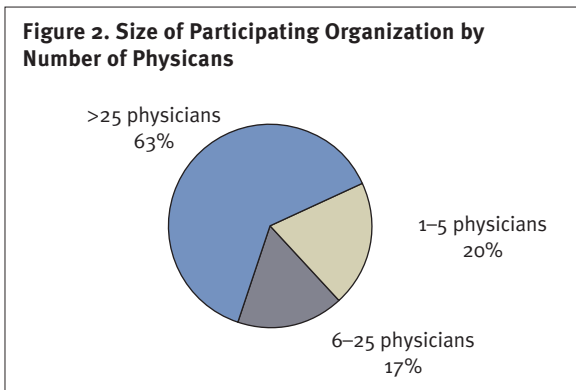
#### PUTTING CLIENT COMMENTS INTO PERSPECTIVE.

*Overall Interest in e-Prescribing (Figure 1).* KLAS professionals conducted 332 provider interviews. Of the 332, 75 respondents (23%) indicated no interest in e-Prescribing and no opinion on the vendors in the market. The data in this report focuses mainly on the 257 respondents (77%) who did have an interest in e-Prescribing. We were surprised by the fact that very few providers were considering standalone e-Prescribing solutions, choosing instead to go with full-blown EMR solutions where they could expand the usage over time. Vendors like Zix, Wellinx and iScribe were rarely mentioned.

Figure 1. Overall Interest in e-Prescribing



*Size of Participating Organizations by Number of Physicians (Figure 2).* An array of physician organizations participated in the survey ranging from small practices with 1–5 physicians to large practices with more than 25 physicians. There is much less adoption of e-Prescribing in the smaller, standalone clinics. Based on interest and usage the study is skewed toward the larger end of the market where there is more acceptance of e-Prescribing and more interest in the vendors targeting the larger practices (Epic, Cerner, Allscripts, etc.).



**Summary.** This 2005 KLAS e-Prescribing/Ambulatory EMR Perception Study indicates that physician offices are not interested in standalone e-Prescribing systems, but seeking an integrated EMR solution that includes one integrated database and e-Prescribing functionality, including drug-drug and drug-allergy interaction checking. This Perception Study indicates that 60% of survey respondents have already chosen a strategy and decision points of feature/function and sole source were the key drivers. Of the 40% of respondents who have no strategy, 43% indicate that 2005 will be the year to determine their e-Prescribing/Ambulatory EMR strategy. Large physician practices are more likely to have a strategy than smaller practices, and based upon survey results and the e-Prescribing/Ambulatory EMR market is healthy, growing, and vendors are ready to provide systems to meet physicians' needs.

**Strategy Chosen.** Of the 332 respondents, 198 (60%) have chosen an e-Prescribing/EMR strategy.

- Chosen vendors in “double digits” are Allscripts (15%), Epic (14%), and NextGen (10%).
- Vendors showing strong e-Prescribing/Ambulatory EMR selection from their existing client base are Epic and NextGen, as 100% of the survey participants using Practice Management products from these vendors also chose them correspondingly for their e-Prescribing/EMR strategy.

- Overall, and following several years of declining volumes in live dates, 2004 represents a peak year for live dates of chosen e-Prescribing/EMR systems. Live dates for chosen but yet to be installed systems extend over several years.
- Feature/function (59%) and sole source (55%) are the leading reasons of why a vendor was chosen and one or the other is the leading reason for each of the top eight vendors considered.

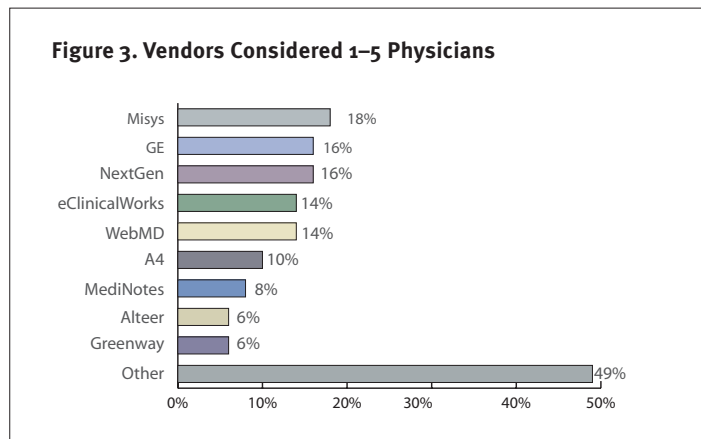
**Strategy Not Chosen.** Of the 134 respondents that do not have an e-Prescribing/Ambulatory EMR strategy, 58 are currently looking for a solution. In addition:

- The majority of those looking for a solution plan to make a selection in 2005.
- Sole source (60%), relationship (57%), cost/value (50%) and feature/function (48%) were identified as the most important decision factors from those who have yet to choose a solution.

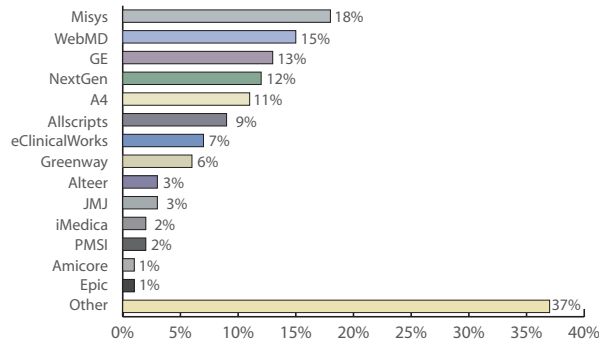
**Physician Findings by Group Size.** Physician group size, as indicated by survey responses, plays a significant role in vendor consideration; however, overall perception scores for all of the vendors are consistent among all size physician groups.

KLAS has separated the data into three different groupings for the convenience of the reader. The categories are 1–5 Physicians, 1–25 Physicians, and Over 25 Physicians. The 1–25 Physicians category is cumulative, meaning it contains data from the 1–5 grouping.

*Vendors Considered 1–5 Physicians (Figure 3).* It is a very fragmented market in the 1-5 physician space. There are lots of smaller, regional and niche players. Fifty-one percent (51%) of providers were looking at the top 10 solutions, while 49% of the solutions being considered were outside of the top 10 solutions. The other category includes Allscripts, DrFirst, EHS, Integrated Healthware, JMJ, PMSI, SynaMed, Amicore, athenahealth, CHART-CARE, Dr. Notes, eCast, eScribe, Genius Solutions, iMedica, MacPractice, VitalWorks and Zix.

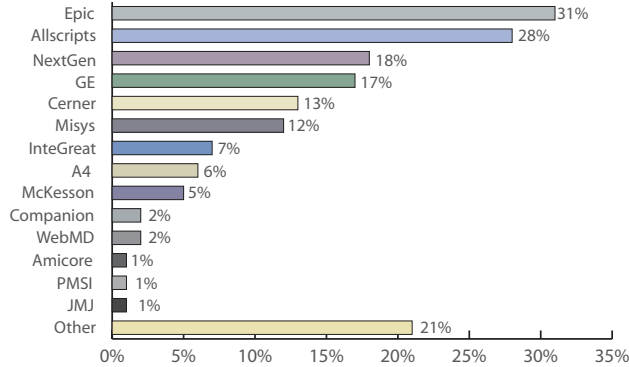


**Figure 4. Vendors Considered 1–25 Physicians**



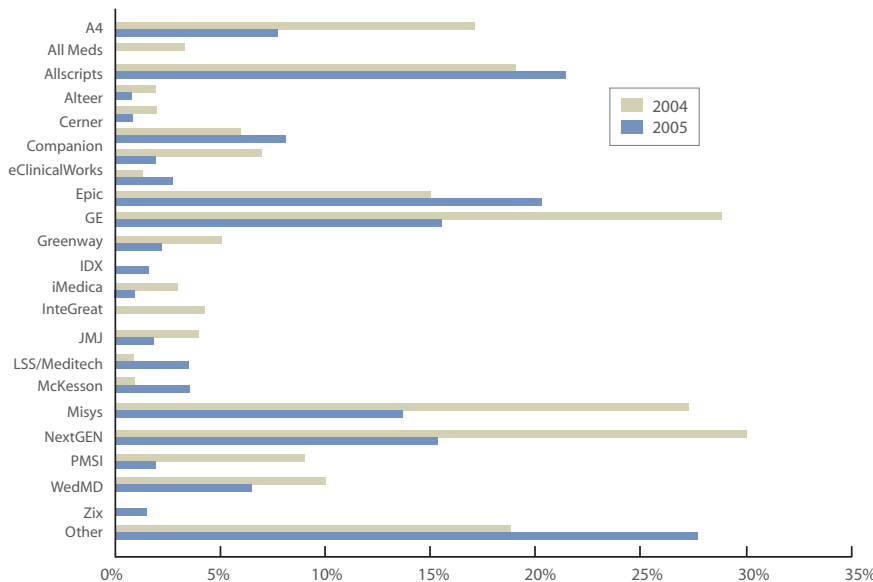
*Vendors Considered 1–25 Physicians (Figure 4).* The Other category includes LSS/Meditech, MediNotes, CHARTCARE, ChartLogic, American HealthNet, CPSI, ePhysician, Dairyland, DrFirst, EHS, Integrated Healthware, SynaMed, athenahealth, ChartWare, Dr. Notes, eCast, eScribe, Genius Solutions, MacPractice, VitalWorks and Zix.

**Figure 5. Vendors Considered >25 Physicians**



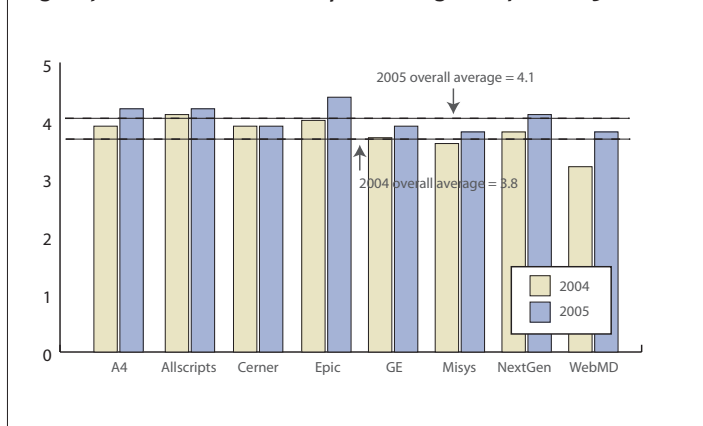
*Vendors Considered >25 Physicians (Figure 5).* The Other category includes LSS/Meditech, Zix, IDX, Eclipsys, DrFirst, Integrated Healthware, eScribe, Surescripts, VitalWorks, Wellinx, AcerMed, Healthvision, Phytel, PocketScripts, SoftMed and Student Health Solutions. *Note:* (1) KLAS is aware that InteGreat’s 7% consideration level is larger than expected relative to the field, as their survey pool was not random. – InteGreat’s results are based on speaking with 11 of their 14 customers; (2) the percentages on this chart are weighted more heavily toward larger physician groups as a result of the level of contact KLAS has with this market.

**Figure 6. Overall Vendors Considered Trend 2004 vs. 2005**



*Overall Vendors Considered Trend 2004 vs. 2005 (Figure 6).* The 2005 e-Prescribing/ Ambulatory EMR Study is the second such study performed in as many years. Participants in both compared the possible vendors in the market and identified key drivers in choosing a particular vendor.

**Figure 7: Overall Vendor Perception ratings 2004 vs. 2005**



*Overall Vendor Perception Ratings 2004 vs. 2005 (Figure 7 where 5=Strong/Available, 1=Weak).* Perception scores are up for the top eight e-Prescribing vendors most often considered by survey respondents. The overall vendor perception rating score is higher for 2005 (4.1) vs. that observed in 2004 (3.8) as seven of the eight vendors showed an increase in their perception ratings for the eight categories measured. Cerner was the exception with a score that remained unchanged. In addition three vendors scored above the 2005 average of 4.1, for the eight categories measured: A4, Allscripts, and Epic.

*Other Practice Management and e-Prescribing.* Many e-Prescribing and Practice Management (PM) vendors were not mentioned by enough survey respondents to be shown in detail in the various charts. Providers who went with “Other” vendors, outside of the top eight, typically did so for price reasons. The highest percentage of respondents mentioning price were buying “Other” products. For the benefit of the reader:

- “Other” Practice Management mentioned by survey respondents included Advanced MD, AHN, AltaPoint, Alteer, Amicore, athenahealth, CHARTCARE, Companion, CPSI, Custom, Dairyland, eClinicalWorks, Experior, Greenway, Integrated Healthware, Keane, LSS, MD Office, MedInformatix, MediSoft, None, PMSI, Professional Data Services, QSI, Siemens, Source Medical, SynaMed PM and VitalWorks.
- “Other” e-Prescribing mentioned by survey respondents includes AcerMed, Amicore, athenahealth, CHARTCARE, Companion, eClinicalWorks, DrFirst, Dr. Notes, Eclipsys, Greenway, Healthvision, IDX LastWord/Carecast, Integrated Healthware, InteGreat, iScribe, JMJ, McKesson, MediNotes, Phytel, PMSI, Siemens, SynaMed, VitalWorks, Wellinx and Zix.

**Offer to Canadian Healthcare Facilities.** Many Canadian Healthcare facilities and organizations use vendors who supply solutions unique to Canada. KLAS – the organization rating IT vendors in this and subsequent issues of ElectronicHealthcare – is willing to gather confidential and candid data from Canadian healthcare executives and provide access to the results to the all data contributors. The vehicle used will be the Web-based KLAS vendor evaluation form found at [www.healthcomputing.com](http://www.healthcomputing.com) under “Rate Your Vendor.” If you have comments, suggestions or questions about this vendor-rating feature, please send an e-mail to [editors@longwoods.com](mailto:editors@longwoods.com).

**About KLAS. WHO WE ARE:** KLAS, founded in 1996, is the only research and consulting firm specializing in monitoring and reporting the performance of HealthCare Information Technology (HIT) vendors and products. Our senior management staff and advisory board average 25 years of healthcare information technology experience.

**HOW WE SERVE THE HEALTHCARE INDUSTRY:** KLAS, in concert with thousands of healthcare executives, CIO’s, directors, managers and clinicians has created a dynamic database of information about the performance of HIT vendors. The KLAS database represents the opinions of healthcare executives, managers and clinicians from over 4,500 healthcare facilities and over 500 different products. The information is continually refreshed with new performance evaluations and interviews daily. The KLAS database is dynamically and effectively used by:

- Healthcare organizations to align expectations with a vendor’s actual performance, to assist in strategic planning and contract negotiations and to validate decision processes
- Vendors to monitor their performance in comparison with competitors’
- Consultants for current performance information on a specific company or product
- Healthcare investment firms to evaluate publicly traded HIT company performance and trends or the competition for a new entrant