

From Zero to 10 in Nine Years...

Leveraging RIS/PACS excellence to achieve growth

By Amy Adams, MBA

SINCE OPENING NINE YEARS AGO IN THE DALLAS/FORT WORTH AREA, Preferred Imaging has grown from a single-facility imaging center to an organization with 10 outpatient sites across a 50-mile radius. The company serves more than 2,000 physicians and performs 50,000 MRI, CT, ultrasound, fluoroscopy, and X-ray exams each year. Plans call for continued growth and development, both locally and nationally.



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dictated a report. Contracted transcriptionists generated reports via telephone recordings and e-mailed these reports to staff at the outpatient facility. Patients' files were taken to the contracted billing service provider and, following claims processing, charts were filed. This entire cycle took an average of three to five business days. Challenges arose with tracking for rescheduled and canceled visits, and storage issues became a problem as the business grew.

THE INEFFICIENCIES OF CHART-BASED WORKFLOW

Upon opening the first clinic, staff members at Preferred Imaging focused on marketing to build solid relationships with referring offices and relied on operations to take care of business on a daily basis. It achieved success in both areas, yet still felt hindered by the magnitude of paperwork and processes involved with moving a single patient through an exam.

Each day's workflow centered on the patient chart. Appointments were scheduled and tracked using a generic medical software solution. After scheduling an appointment, front office staff created an individual chart and labeled all necessary paperwork. The chart moved from one department to the next as the patient progressed through the system. Frustration resulted when charts were lost or missing. Referring offices were asked to refax orders, and many steps of the process had to be repeated. The system was flawed, with too much room for human error and a lack of efficiency.

Once the scan was completed at the outpatient facility, an office staff member either walked the paperwork to the reading room or faxed it to a radiologist at the hospital. If needed, films were driven to the site where the physician read the study and

FIXING PROBLEMS, NOT STRATEGIES

Upon opening a third location in May 2002, Preferred Imaging identified the need to upgrade its information system and purchased a RIS with hopes that productivity and organization would improve. While the system helped in some areas, the company continued to struggle in others. Workflow was still inefficient based upon operating three separate solutions – the RIS, the PACS, and a billing system. Integrating these systems would have been costly and had potential to result in lost days in the revenue cycle.

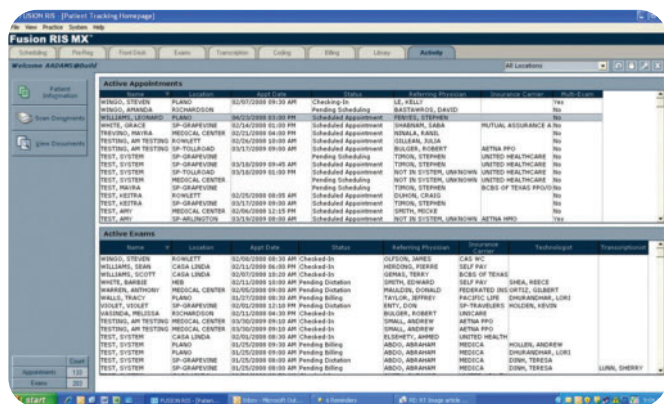
Clinics created workarounds with the "triad" system, but soon realized that the existing IT infrastructure did not support strategic plans for rapid growth. Still lacking were pre-authorization tools, accuracy in matching up patient data with images, efficiency in dictation, and more. Workflow was compromised because users needed to switch between different systems to complete the steps required for each patient visit.

Despite this, Preferred Imaging continued to thrive as three additional centers opened between 2004 and 2005. For each opening, significant time was spent preparing chart paperwork, ordering necessary supplies for charts, and staging the center with appropriate "bins" for charts to flow through the system.

During this time, Preferred Imaging's leadership acknowledged being ahead of many imaging providers with regard to patient care, equipment technology, physician relations, and report turnaround time. Yet there were deep concerns that the company's imaging information system was holding it back. This, coupled with the foreshadowing of Deficit Reduction Act-based reimbursement cuts, drove action to seek a more efficient means of operations – to ensure not only survival in the market, but also continued growth.

RIS AND PACS: TO INTEGRATE, OR NOT?

In early 2007, Preferred Imaging initiated discussions with vendors to evaluate integrated systems that encompassed RIS, PACS, and billing. Requirements included patient scheduling, recording of demographic and billing information, technologist notes, commu-



Merge's Fusion RIS MX program in action

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nication of demographic information to imaging modalities, presentation of images and clinical information to the radiologist, diagnostic dictation and transcription, image archive, and billing.

After numerous systems were evaluated, Milwaukee, Wis.-based Merge Healthcare was chosen as the vendor offering the best single package to meet Preferred's broad range of needs. Implementation of Merge's Fusion RIS/PACS MX began in late 2007. Seven of Preferred Imaging's sites were live by February 2008.

BRINGING STRATEGIC VALUE

Over 18 months of using the integrated RIS/PACS system, Preferred Imaging made significant progress in improving clinical excellence, enhancing customer relationships, and optimizing workflow efficiency. The company has been able to:

- Reduce staff. One front office full-time employee per center was eliminated, as manual busy-work associated with creating and moving patient charts through the system was reduced significantly.
- Consolidate insurance staff into one centralized office by digitizing previously manual work.
- Share data across the enterprise to enable efficient cross-site back-up coverage. For example, if a front office employee is sick, an employee at a different location can assist with this person's work from their own environment. This has helped reduce overtime by more than 70 percent.
- Improve the quality and efficiency of the image interpretation process.

- Reduce transcription turnaround by more than 70 percent.
- Minimize use of film. From 2007 to 2009, overall film expense decreased by nearly 65 percent.
- Bridge billing gaps. The billing cycle has accelerated from an average of about four days to zero. A charge can now be generated on the date an exam is completed. Now, each month is closed out by the third or fourth business day, rather than having to wait until the 12th or 13th business day.

Today, the ease of opening a new center is unbelievable. Preferred Imaging opened its ninth and 10th centers during 2009 without many of the headaches of past start-ups. What previously took weeks or months to accomplish, now takes only a few days. Once the RIS/PACS is installed in the new location, the clinic is ready to go, without the worry of creating forms, making charts, or creating workflow stations.

A fully integrated, filmless, and paperless RIS/PACS solution has been a necessity for the company's success and will continue to be critical to Preferred Imaging's expansion. With this, the organization has all the components needed to effectively manage business no matter how large or how quickly it grows.

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