

Hospital CEO: Electronic health records, planning are priorities

Written by Elizabeth Barrett

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GMH tackles \$1.4 million project after okay from board.

With a deadline looming to be eligible for federal dollars, Gothenburg Memorial Hospital is transitioning from paper to electronic medical health records.

Mick Brant, GMH chief executive officer since mid-November, is in the thick of the project.

A few weeks ago, the hospital board approved the \$1.4 million project which will be funded largely with federal stimulus money, a Rural Economic Development Loan and Grant (REDLG), an interim line of credit from First State Bank and contingency funds from GMH.

The 45-year-old would rather be gathering information, assessing the hospital and doing strategic planning before plunging ahead but there's a carrot at the end of the stick.

Federal stimulus funds go away in 2015.

As part of federal health care reform, Medicare payments will be cut to medical facilities that haven't switched to electronic records by the end of 2015.

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Local hospital officials and the board are hopeful the transition at GMH is done by April 2014.

Brant said he thinks the goal of electronic records is to standardize the way medicine is practiced which will lower costs because “everyone is doing it the same way.”

A good illustration of the need for electronic records can be illustrated in the aftermath of Hurricane Katrina. In New Orleans, and other cities, the disaster wiped out paper health records.

“People showed up in shelters and didn’t know what meds they were taking,” Brant explained. “That was a stark reminder of how vulnerable we are.”

With everyone connected electronically, he said patient records can be shared easily and quickly which lowers costs.

FUNDING	
A \$1.3 transition to electronic health records at GMH will be funded by the following sources:	
Medicare	\$705,000
REGI-G fees	\$350,000
Local bank	\$245,000
Total	\$1,310,000

For example, Brant said someone on vacation who experiences an emergency can easily have a his or her hometown doctor electronically send health information.

“An emergency room doctor would have access to everything seen in a clinic and can pull it up on a computer,” he said.

Electronic health records also eliminate errors when compared to paper record keeping, he said.

Brant, said health-care facilities are 20 years behind other businesses and industries when it

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comes information technology.

“Everyone shares data,” said Brant who spearheaded information technology projects at the Yuma (CO) District Hospital and at Grace Cottage Hospital in Townshend, VT.

The health care system needs electronic records for many reasons, he said, especially because of exploding health care costs.

Money will be saved but not initially.

“Information technology is infrastructure like power lines,” he explained. “You won’t get paid back for the equipment needed but it will eventually pay off over time.”

Once actual implementation begins, he said it will involve the entire staff because all departments use medical records.

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