The University of Missouri’s Regional Center Planning Team recently conducted a voluntary survey of physicians to assess their use of electronic health records. The planning team, which includes faculty and staff from the Center for Health Policy; the Department of Health Management and Informatics; the Missouri Telehealth Network; and the Department of Family and Community Medicine, designed the survey with input from Missouri provider organizations to learn more about Missouri physicians’ attitudes about electronic health records as part of its preparation for submitting an application to be a regional center for the state of Missouri.

The survey was distributed by the major provider organizations in the state: The Missouri State Medical Association (MSMA); the Missouri Association of Osteopathic Physicians and Surgeons (MAOPS); the Missouri Academy of Family Physicians (MAFP); the Missouri Chapter of the American College of Physicians (ACP); the Missouri Chapter of the American Academy of Obstetricians and Gynecologists (ACOG); the Missouri Chapter of the American Academy of Pediatrics (AAP); as well as the Missouri Primary Care Association (MO-PCA). Responses were received beginning on January 4, 2010 and the survey remains available today. As of February 18, 2010, 329 individuals started the survey and 280 (85.1%) completed the survey. A copy of the survey instrument is attached for reference. We recognize that the number of individuals who responded to the survey represents a fraction of the physicians, nurse practitioners, and physician assistants who are currently practicing in Missouri. We also recognize that since this is a voluntary survey, respondents are more likely to be early adopters of electronic medical records. This survey is not intended to provide a comprehensive picture of electronic medical record adoption among physicians and health care providers in Missouri.

The survey included definitions of “electronic medical record,” “electronic health record,” “health information exchange,” and “health information organization” and asked respondents to refer to these definitions when answering questions in the survey. Several of the questions required that participants provide an answer before moving on to the next question.

The survey began by asking respondents whether they currently use an electronic medical record or electronic health record in their practice. This question required a response, and included options for practices that were in the process of adopting and EMR or EHR. Just over 40% of respondents (40.7% or 134 respondents) indicated their practice was completely electronic, while 32.5% reported their practice was partially electronic and paper. Nine percent reported that they are in the process of beginning to use an EMR, and 17.3% reported that they do not use an EMR or EHR.
Respondents who indicated they are currently using an EMR or EHR, either completely or in combination with paper records, were asked a series of questions about their EMR. Respondents were asked to indicate which EMR product they are currently using. Respondents had a list of 15 EMRs to choose from, and could also specify another product if their product was not listed. 223 Respondents answered this question, which did not require respondents to answer. Nearly 80% of respondents used six EMR products. A Cerner EMR product is used by 30.5% of survey respondents, while an Epic EMR product is used by 14.3% of respondents. Twelve and a half percent of respondents use an Allscripts product; 8.9% use GE Centricity; 8.5% use NextGen, and 4.9% use eClinicalWorks. The remaining 20.4% of respondents report using a variety of products, including EHS, Meditab, Meditech, Practice Partner, Sage, and Soapware. Just over half of respondents reported being somewhat satisfied with their EMR product, and the majority (70.3%) would recommend their EMR to another practice. Most respondents (90.9%) indicated they were not considering switching to another EMR.

Respondents were asked about the features available with their current EMR. Respondents were instructed that for purposes of this question, the term “available” means that the EMR has the feature, the respondent knows how to use the feature, and the respondent currently uses the feature. The following features were reported to be available with the EMRs currently used by respondents:

- Patient Demographics (95.5%);
- Patient Problem Lists (92.2%);
- Orders for prescriptions (91.7%);
- The ability to view lab results (95.0%);
- Clinical Notes (95.9%); and
- Electronic lists of what medications each patient takes (95.4%).

EMR features most frequently reported as not being available with current EMR include the ability to exchange lab data and clinical notes with hospitals or other providers outside the respondent's practice or system (57.5% for lab and 55.8% for clinical notes); public health reporting (49.1%) and allowing patients to review their medical records (55.4%). Respondents most frequently reported not knowing about the availability of access to electronic claims and eligibility information (38.7% for claims and 40.7% for eligibility); public health reporting capabilities (42.5%); and quality reporting capabilities (28.6%) with their current EMR.

Respondents were asked about their participation in selected existing Health Information Organization initiatives in Missouri. Sixty-four percent of respondents indicated they did not know whether they participated in any Health Information Organization. Thirty-two percent reported using MO HealthNet's CyberAccess.

Respondents who reported that they do not currently use an EMR were asked about their future plans to use EMR. Sixty-seven percent reported they intend to use an EMR in the future, while 20.5% indicated they might begin using an EMR in the future. The time frame for beginning EMR use varied, from 28.9% reporting they plan to begin using an EMR in the next two years, to 22.2% reporting they intend to begin using an EMR soon, within the next 6 months. Respondents indicated that financial assistance (66.7%), and technical assistance and support (65.1%) would be two of the most important factors in helping them make the decision about whether or not to begin using an EMR. They also reported an interest in receiving workflow analysis and redesign (49.2%) and help in selecting a vendor (42.9%).

Respondents were asked about their interest in receiving assistance in several areas from a non-biased source. The areas identified are the services that the Regional Centers are charged with providing to primary care providers. While 50% of the 279 individuals who responded to this question indicated no interest in services in any of the categories, respondents did indicate an interest in receiving assistance in the areas of interoperability and connecting to health information exchanges (35.1%); onsite practice and workflow redesign to integrate the use of EMR (33%); and technical assistance around federal and state security and privacy requirements as they relate to EMR (32.3%).

Overall, respondents were not familiar with either the HITECH Act provisions of ARRA, or the role of the Regional Centers as outlined in ARRA. Forty-five percent reported being not familiar at all with the HITECH Act, while 29.7% reported some familiarity. Similarly, 72.2% of respondents indicated they were not familiar with the role of the Regional Centers, and 17.3% indicated some familiarity.

Respondents were asked about the characteristics of their patients. Thirty-seven percent of respondents reported that more than 30% of the patients their practice treats overall are covered by Medicare. Thirty percent reported that fewer than 20% of their patients are MO HealthNet participants, while 28.9% reported that more than 30% of their patients are MO HealthNet participants. Fifty-two percent of respondents indicated that fewer than 10% of their patients are uninsured, but 22.6% reported that between ten and twenty-five percent of their patients are uninsured.

The majority of survey respondents were either M.D.s (71.4%) or D.O.s (19.2%). Respondents also included those who served a variety of other administrative roles in the practices. The majority of survey respondents
were primary care providers practicing family medicine (41.8%), pediatrics (23%) and internal medicine (19.9%). Forty-seven percent of respondents indicated they practice in clinics affiliated with hospitals and 28% indicated their practice is a stand-alone clinic. Providers who practice in FQHCs represented 15.8% of respondents, and 13.4% of respondents indicated they practice in rural health clinics.

Survey respondents were also asked about the number of physicians, nurse practitioners, and physician assistants in their practice. This data was complied to determine the total number of prescribers in each practice represented in the survey. Survey respondents were overwhelmingly from small practices, with 175 respondents indicating they had a total of 10 or fewer prescribers in their practice. Another 36 respondents indicated their practices had between 11 and 20 prescribers. On the other end of the spectrum, 37 respondents indicated their practice had more than 100 prescribers. The majority of the respondents who reported a practice size of less than 10 prescribers reported their practice location was either a stand-alone clinic (57) or a clinic affiliated with a hospital (56).

The University of Missouri has used the information learned in this survey as part of its application to the Office of National Coordinator for Health Information Technology to be a Regional Center for the state of Missouri. This survey report has been shared with the provider organizations that helped to distribute the survey to their members, as well as with the Missouri Department of Social Services’ Office of Health Information Technology (MO-HITECH) and the MO-HITECH State Advisory Board. The report will also be made available to other health policy stakeholders and interested parties via the University of Missouri, Center for Health Policy’s website, [http://healthpolicy.missouri.edu](http://healthpolicy.missouri.edu).