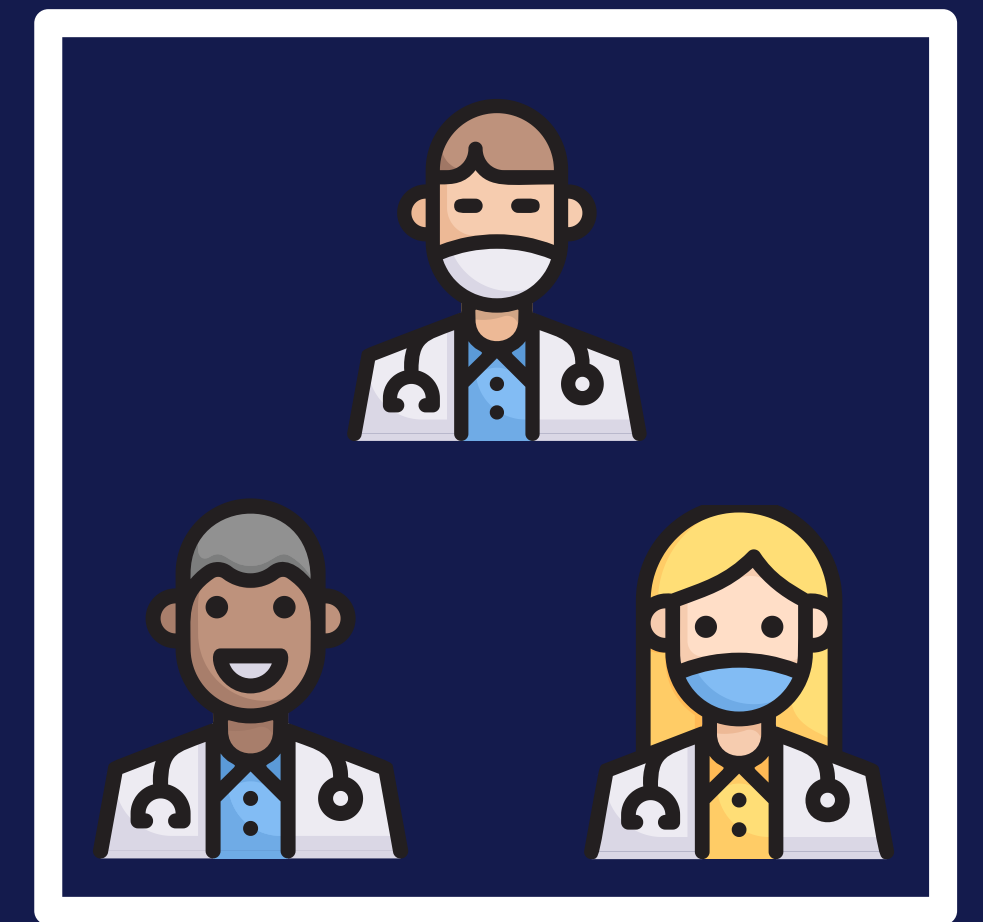
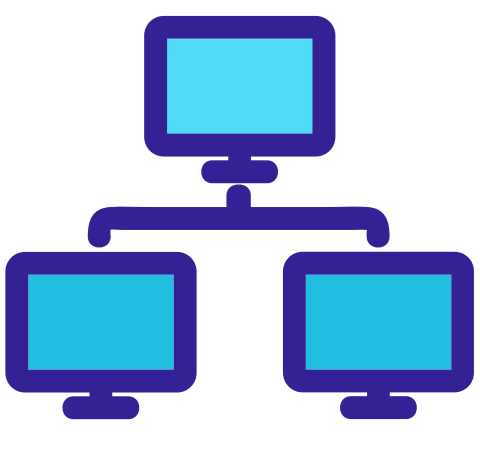



Blended Capitation Groups in Multiple EMR Instances

Considerations for joining a common instance or maintaining separate EMRs



Blended capitation (BC) groups can be spread across more than one EMR instance. In this document we explore the pros and cons of bringing EMR instances together for Blended Capitation groups vs maintaining separate instances.

Option	Advantages	Disadvantages
 <p>Maintain separate EMR instances</p>	<ul style="list-style-type: none"> • Privacy: Optimum privacy of patient records due to separate databases. Also ensures privacy of Physician information. • Data: No data conversions required. This preserves the integrity of all patient data for all physicians within their own instances. • EMR use: Preserves the customization and configuration of each EMR instance according to each individual physician's preferences. • Cost: No cost to either participating physicians or eDOCSNL. • Logistics: Minimizes inconvenience and cost by avoiding the scenario wherein a physician joins an EMR instance purely for BCM purposes and decides at a later date to leave the group. 	<ul style="list-style-type: none"> • Information Sharing: <ul style="list-style-type: none"> • No easy visibility of records in other EMR instances. • This limits the degree of continuity of care being provided and insight into patient history when seeing a patient from another EMR. • Creating a record in another instance splinters the patient data unless the chart is actively shared following each encounter. • No visibility of schedules for other physicians in the BC group working in other EMRs. • Rostered status of individual patients is not visible from one instance to another. • Some of these issues could be mitigated by view-only access. • Tasking: Tasking each other across separate instances is an active process, which makes coordinating BC group activities more challenging.
 <p>Come together in a single EMR instance</p>	<ul style="list-style-type: none"> • Data: All patient records available in the shared EMR, with some limitations due to data migration. Schedules visible to all. • EMR use: Opportunity to standardize content and workflows and share knowledge about EMR use in a shared instance. • Logistics: Rostered status of every patient will be visible, as well as the shared patient health record, regardless of physical location of the participant. • Cost: Better chance of being able to realize some efficiencies vs separate instances, which may help reduce collective cost. • Tasking: Users can task each other in a single instance, which assists in coordinating care. Easier to ensure results are reaching the right provider when patients receive shared care. • Support: Help for one is help for all. 	<ul style="list-style-type: none"> • Privacy: Patient records that are not rostered to any of the physicians in the group can be viewed by anyone who works in the instance. Anyone with administrative access to the shared instance will be able to see physician information for all members of the BC group. • Data: Some physicians joining the instance will require data migrations. Not all data is preserved during data migrations so some physicians will lose some data in the move. • EMR use: Maintaining full customization and full EMR use for all participating users of a shared instance may not be possible. • Cost: There will be some cost to either the physicians and/or eDOCSNL as a result of combining instances, primarily related to moving data. • Logistics: If a physician joins an EMR instance purely for BCM purposes and decides at a later date to leave the group there will be an additional migration required.



Summary

There are many factors to consider regarding instance configuration when participating in Blended Capitation groups. This is a complex decision that has clinical and business implications which should be considered carefully by participating Physicians. Please reach out to eDOCSNL at info@edocsnl.ca for more technology related questions.