

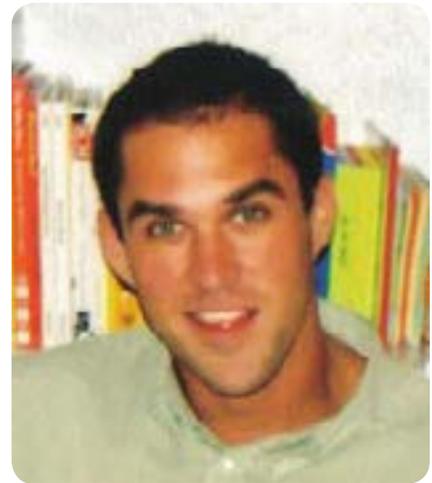
Surf Pediatrics and Adolescent Medicine: Doing Swimmingly Well



"You can work wherever you are and Dr. Lige can chart wherever he is. I traveled across the country for a month and I worked with WRS all over the place."

Christian Lige, M.D.

**Specializes in Surf Pediatrics and Adolescent Medicine
Nags Head, N.C.**



Ocean view. Located right off the beach. Looks like a lighthouse station. Rocking chairs on the porch. Reads like an enticing real estate ad for a summer rental by the shore, right? *Wrong.* It's the home of Surf Pediatrics and Adolescent Medicine, which opened its doors in January 2008 in Nags Head, North Carolina. Sure, the Outer Banks is a great place for lounging around. But, Christian Lige, M.D. is doing anything but takin' it easy.

With 6,000 active patients and a daily showing of 35 to 40 patients a day, Surf Pediatrics and Adolescent Medicine recently took the plunge and opened a satellite office in Kitty Hawk. How did Dr. Lige manage to grow his pediatrics business in this rural area with a population of 30,000 (that swells to 300,000 in summer) in the Outer Banks of North Carolina?



Build It, They Will Come

Noting that Dr. Lige has been a pediatrician for 12 years and that he started his career at what is now called Outer Banks hospital, Joy Lige, Dr. Lige's wife and CFO said, "He wanted to be able to see patients when he wanted to see them. He didn't want to deal with the administration and not be able to say to the receptionist, 'yes, I can see that person' or to be able to double book. He was mainly trying to increase patient care. He went out on his own at the end of 2007 and because we

knew healthcare would be going electronic, now would be the time to start with an EMR when we opened. From the get-go we wanted to use an EMR system that was easy because we couldn't take the time to only see five patients a day. We had a large quantity of paper charts migrating. A lot of practices are having this issue now, but we had this five years ago."

“We use WRS billing for activity reports so that we are able to tell what each office is doing monthly. We can track things down if they are still lingering. That happens a lot. We can easily figure out what is still lingering and rebill them. You can do daily collection reports to see what’s coming in. You can run patient statement reports so you can figure out what patients’ responsibilities are and send those out.”

Surf Pediatrics and Adolescent Medicine evaluated the likes of eClinicalWorks and Allscripts before choosing WRS. “Those are the big guys and at the time we were very intimidated with the whole thing. Now it appears that based on the federal regulations, you have to have a lot more bells and whistles, and WRS served us beautifully because we were able to start from the basics and then understand the system and grow with it,” asserted Lige.

Recalling that she did a web search and found WRS, Lige said, “We immediately clicked. And they knew exactly what we were doing. We talked with Dr. Lawrence Gordon, the founder of WRS. I thought it was fantastic that he understands the positives and what the restrictions are of being a doctor-- plus he also uses WRS EMR.”

Surf’s Up

Like a family that outgrows its living quarters, the Liges recently found they needed more space for Surf Pediatrics and Adolescent Medicine. They found that the water’s just fine to jump right in and expand with a satellite office in Kitty Hawk. “We were outgrowing our space. This is not a big city. A lot of people in the new area where we opened don’t like to travel here because it takes them 20 minutes. There are some urgent care centers in Kitty Hawk and we are seeing some of our population go to our urgent care office for sick visits while they come to the main office for preventive care and we want to capture some of those visits. We’re gaining business. One good thing is being on a cloud based system. We have a half day in one office and we’re within 20 minutes of the other office. Patients can schedule in either office because we all work on one system. That’s been great—it’s a very easy thing to maneuver,” said Lige.



Off The Charts

Using an EMR with pediatrics templates is enabling Dr. Lige to provide excellent patient care. “We have templates that the doctor uses including all of the growth charts. You just pop in the weight and height and you get your BMI points. It’s nice because it shows the patient’s progress. When a child comes in for preventative well child visits you take their height, weight, and head circumference. That is then plotted on a standard chart and you are able to tell if a child is growing correctly or if there are any issues. For a child born early you can see where they are falling on that chart. You can also see if a child has obesity issues. These are all things that are required and they are standards for pediatrics. That’s a standard template WRS built for pediatrics patients,” said Lige.



Emphasizing that last summer the National Committee of Quality Assurance (NCQA) certified the practice as a level 3 Patient-Centered Medical Home (PCMH), Lige said, “You really have to show how you are using your EMR to manage your population base and to make sure people are getting their well child checks. Because of WRS, we have our standard templates for our well child checks. Say the patient has a chronic disease such as attention deficit disorder. You are using your electronic system to make sure you are doing the right thing. Definitely, a big thing with a PCMH is the consistency of your templates to make sure you have all of your well checks, and that you are making sure someone coming in for an age visit gets all of the necessary steps. We’re very template based and we set them up. It’s very simple to set up in WRS. Certainly, as we do more and more things required from the government, such as different screenings, we can change those templates. We work with Waiting Room Solutions to change the templates, but you do have that functionality within each practice to do them.”

Lige continued, “Under HIPAA I could say that there’s no way a practice would be working right now if they didn’t have an EMR. Because we’re a recognized PCMH, we get a higher reimbursement rate from Blue Cross Blue Shield. There are initiatives coming out with Cigna and Aetna and they are doing pilot programs in some states showing that if you are a patient centered medical home, we are going to increase your rates because we understand the level of complexities involved and your requirements. We have a system that can handle that which is nice. We just got a letter from Aetna, saying, ‘you are going to be in the directory recognized as a patient centered medical home, so you’re a preferred provider.’”

After Hours

If there’s one specialty which takes the prize for taking care of patients’ needs and medications after office hours, it’s pediatrics. A pediatrician can take advantage of e-prescribing to meet the

needs of patients, especially after hours. “The advantage is that if either doctor is on call in the evenings or on weekends, if they are talking to a patient they can easily get in the system on the weekend or at night. If a parent calls and says, ‘My child has an ear infection,’ it’s okay to send a script if needed. That’s definitely fantastic. A lot of patients like that service as well, to not have to hold the script,” said Lige.



Keeping Track

With a heavy patient load, it’s not uncommon for outstanding payments to accumulate which can take a financial toll on a practice. How can a physician stay on top of patients’ financial responsibilities? “We can track our accounts receivables perfectly. We use WRS billing for activity reports so that we are able to tell what each office is doing monthly. We can track down if things are still lingering. That happens a lot. We can easily figure out what is still lingering and rebill them. You can do daily collection reports with what’s coming in. You can run patient statement reports so you can figure out what patients’ responsibilities are and run that and send those,” said Lige.

Head Counts

Getting a grasp on how many patients visit your practice and whether they are coming in for a sick visit or well care can help a practice to improve patient care. WRS demographics reporting function has rescued Lige from the arduous task of keeping track of this data. Commenting on this insightful update, Lige said, “Before I was doing hand counting of how many patients, how many types of patients, if they were coming in for sick or for preventative care. I was hand counting to get that information and to understand what was occurring in our practice. Six months ago WRS started putting on those reporting functions, which is good.”

Holding Hands

Pointing out that the practice began using the EMR from its inception, Lige said the system is very user friendly. “It’s very easy to understand Waiting Room Solutions. With what’s occurring, it can be very overwhelming for a lot of people. WRS has free webinars. We still sit in on them. It’s always changing and there’s always things that you can see. They’ve done a great job developing videos to understand the Meaningful Use numerator, denominator and if I have any follow up questions I can send a support ticket in. I think that’s great. One thing I really do like is that WRS is not ‘Allscripts’—these large organizations. I know the WRS founder and CEO. I have his e-mail, so I can e-mail if I’m having an issue,” she said.

Pointing out that Medicaid is a very large percentage of their business, Lige said WRS came to the rescue when it faced a major roadblock in getting paid. “Gateway was getting ready for the 5010 transition that was supposed to automatically occur six months ago but then the feds held the date back. All of our Medicaid claims were getting bumped because Gateway was starting to do 5010 and Medicaid wasn’t up and running yet. We weren’t paid for two to three months with Medicaid, which is a big, big chunk of change. We actually heard these other issues with other practices in our area. WRS really worked it through. It took some time but they didn’t just drop it and say, ‘you’re on your own.’ WRS spearheaded it and made sure Gateway fixed it. We had to keep resubmitting claims. That takes a lot of time. Then we talked to other practices and they said, ‘we’re not getting help from our EMR vendor.’ WRS does listen. They understand and they will help. They did help and they definitely followed up. They didn’t just drop the ball and say forget it.”

Crediting WRS for its Meaningful Use Reporting functions and exemplary certifications, Lige said, “They are very easy to use. We have received our Meaningful Use incentive for year one from North Carolina Medicaid. The success story for WRS is they have been very proactive in that. You have to have a vendor who has certifications—it was definitely important for Meaningful Use. That was definitely a good thing.”

Off The Clock

With a busy practice and five children to care for, Dr. Lige is able to leave the office at 5:30 pm, but his work doesn’t end when he closes up shop. Thanks to WRS EMR he charts every evening from home. “You can work wherever you are and he can chart wherever he is. I traveled cross country for a month and I worked all over the place, so that’s great,” said Lige.



Meeting Federal Requirements

Noting that these days practices need to provide the federal government with documentation, Lige said, “That is a good thing, but there are a lot more check boxes you have to fill out. Whether you are using an EMR, there’s definitely a lot more data that has to be collected on each patient than when we started the practice five years ago. We’re involved in so many different screenings that are required, such as drug and post-partum screenings. We have every single well visit. Kids have to do well visits yearly after the age of five, but before that it’s a lot more frequent. There are different screenings you have to do. We just scan those in. I manage data. I love it because I can easily tell what’s required such as, we’ve forgotten this person hasn’t come in for their well

visits. I think it's great for those things. Now for these new standards we have to show how we are managing costs. As children get out of our system, phase out of pediatrics to adult practice, we need to show them care transition plans."

Visit Our Website

Do you want a website? When WRS asked Surf Pediatrics this question, it was a no brainer. A pediatrics website meets yet another PCMH requirement, it is good for patient care and it promotes the business. "It was one of the products WRS had built and so we just said, we'll sign up for it. It allows a patient to request an appointment, for patients to look at lab results, and put in their histories. It's good because these are all check things you need to have to become a PCMH. If you have the capability to use it, that's a check box. Patients can also have online discussions. You can send a message to the doctor. It goes in our inbox. These are the kinds of things the government looks for," she said.

Let's Chat

The Liges have some aces up their sleeves when it comes to fostering patient care and education reminders. "We had e-mail reminders turned off for a long time. Then we turned it on. For instance, we'll e-mail anybody that hasn't been here in over a year for a well visit. You can change the message to whatever you want. It's a great thing to have. The phones were off the cuff. We couldn't even handle it. We turned it off again because some of our queries weren't right. We are going to slowly turn the reminders back on and do smaller groups of people. We can take an e-mail list from WRS system, and we'll make a canned e-mail about something for babies under the age of one. We're going to try to see if we can use that as another medium for patient education."

Survey Says

Like it or not, patients have good and bad opinions and knowing just what they are thinking can help ensure more satisfied patients. "That's what they are looking for, so that is something we are going to start doing. It's great having an electronic system; it's a great way to manage patients. On our website we built in a link for a patient survey that patients can fill out on their own. We get a list of patients that have come in over the past quarter and we'll generate a survey and send that out," said Lige.

Scheduling Patients

Emphasizing that the EMR makes it very simple to schedule patients, Lige said, "We use the task function a lot within WRS which is a great thing for inner communication between offices

and even when you are in the same office you can tell who sent it, when it was completed, what time and what date. You can track that. I can use that at home. We'll have to follow the standards that just came out a couple of months ago. We have to do screen shots. The government wants to know from a scheduling standpoint if you are supposed to see patients within 24 to 48 hours of them calling and scheduling. You have to prove that. With WRS scheduling, you can show who scheduled it, on what date, and it's in a little box in our schedule, so I can say receptionist "X" scheduled it today for tomorrow so that shows we met the 24 to 48 hour window. WRS has understood what is required."

Giving Back To The Community

Now that the Liges have been fortunate enough to have a thriving practice right by the sea, (Lige admits they do go swimming when they want to) they've been generous enough to give back to the community. "We started a foundation two years ago which provides a home for respite children. One of our missions is to develop a clinic. We're trying to do that overseas. We're involved in Reach Out and Read Program for children that started in Boston Children's Hospital. He always envisioned that. You look out his office and you can see the ocean. It's a very welcoming conducive environment to children's positive growth. I'm not saying that a hospital isn't, but it's a different feel. The new satellite office is within a medical center so there's an urgent care center and some different specialties. There's a more clinical feel to it, but people like that too," concluded Lige.

