During the last decade, the US Government (Gov't) decided it would be beneficial to have all American physicians and healthcare institutions lease Electronic Medical Records (EMR) or Electronic Hospital Records (EHR) software and buy supporting hardware. The logic to get every physician to use an EMR or EHR was sound. It was believed, without any supporting evidence that EMR's and modern health information technology would improve patient safety, healthcare efficiency, productivity and healthcare value=outcomes/costs manufactured and produced by physicians with patients leading to the delivery of safe, quality affordable healthcare for more if not all Americans.

To motivate physicians and healthcare institutions to lease this EMR software, the Gov't mandated a variety of cash penalties on physicians and institutions if their chart notes, billing and clinical quality measures were not manually inputted and submitted to the Gov't 'electronically'. After the mandated physician and institutional penalties became law, EMR companies sprung up overnight and were able to give
their executives and investors $10's of billions of dollars of return on investment. In a cynical slap in the face of patients and their physicians, most of the patients personal Health Chart information inputted by physicians that was supposed to be aggregated by EMR companies and returned to physicians to optimize care is instead sold to all the ancillary healthcare industries to help focus industry marketing and optimize industry EBITDA. Although physicians costs for leasing EHR software and buying support hardware is as much as a luxury automobile, EMR companies refuse to release their back-end quality, value=outcomes/costs or workflow time or clicks per user data to prospective physicians or institutional customers, much like window stickers at Automobile dealerships. Instead of transparent user data demonstrating the value and efficiency or productivity of their EMR product, the EMR industry uses the avoidance of government penalties as their sole marketing pitch to hapless physicians and institutions. The threat of Gov't penalties delivers an indirect subsidy to an EHR industry who's product has no demonstrated market or clinical value for either physicians or patients. The industry appears to collude to avoid giving physician consumers transparent conclusive clinical or workflow data to support any kind of clinical value=outcomes/costs, improved safety or efficiency for physicians or patients or ROI for physicians using EMR's. By 2017 90% of all physicians were leasing and using EMR software in their practices. Not since the days of Madoff have so few profited massively from a product of so little value.

If the EMR industry can not deliver a minimal clinically viable product to get physicians and institutions to lease their software without the threat of Gov't penalties and the $35 Billion in direct taxpayer subsidies delivered to them thusfar, then the industry should not exist. The fastest way to improve the quality, clinical applicability and patient focus of the EMR industry will be to remove the Gov't subsidies mandating physicians and institutions lease EMR's. Removing physician and institutional penalties would force the EMR industry to compete capitalistically
and reveal true workflow and cost data to deliver a software product with clinical value for patients and their physicians instead of sacrificing patients and physicians to fuel ROI for an EMR industry run-amok.

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