HME TODAY TOOLS AND TACTICS FOR HOME HEALTH PROVIDERS

ASCEND media

Search [ ] **GO**

Issue: **June 2005**

Paper Killer

by Roberta Domos, RRT

If you're thinking about document scanning software, be sure the package you choose has the right features.

Article Tools

>> **Email This Article**

>> **Reprint This Article**

>> **Write the Editor**

Take a look around your average HME business and you may see more employees managing documents than providing services to clients. The massive amount of paperwork that HME providers must generate, log, file, copy, and routinely reference accounts for much of what makes the industry so labor intensive.

And the cost of managing all that paper does not stop there. Valuable floor space is taken up by endless rows of expensive filing cabinets. Searching for the inevitable misplaced file reduces employee productivity. There is no doubt about it—managing documentation is a critical and often expensive proposition.

Fortunately, advances in document scanning technology add efficiencies to the document management aspect of the business. You can almost do the "return on investment" calculation in your head. Huge hard drives are less expensive than filing cabinets, and computers can search for a specific document much faster than even the most skilled filing clerk or reimbursement specialist. Ensuring that documents are accessible to multiple employees while preventing lost client files is invaluable.

Document imaging is a fairly simple process. Batches of files are fed through a scanner, then text is processed by software that recognizes text or bar codes and indexes the contents of the file. A computer user reviews the scans, and typically, some degree of user intervention is required to complete the computer media storage process.

Reducing the paper in your company does not have to be complicated, but getting started is probably not a "do it yourself" job. The package you choose should come from a company that understands the unique concerns of the HME business, offers hardware and software that works well together, and includes training in the use of the hardware and software. Yet even within that small subset of vendors, software and hardware capabilities and costs can vary greatly. So it makes sense to carefully assess the various options to find the one that makes the most sense for your company.

The basic requirements of a document imaging system designed for the HME industry are straightforward. A capable system should:

- enable you to manage tens of thousands of documents and quickly retrieve the documents you seek;
- provide access controls that allow sharing of documents among various employees with a need for the information, while protecting patient confidentiality;
- be easy to use and require minimal technical knowledge to operate;
- and offer a fair degree of automation of the archiving process.

Specific factors to consider when evaluating a system come down to a few essentials—the speed at which documents can be scanned, the degree of accuracy and readability of the scanned documents, and the amount of user intervention required during the archiving process. A document scanning system that interfaces well with your current HME software and allows you to access client paperwork from within the system is an added bonus.

Naturally, higher end hardware and software will offer enhanced features, but that does not mean the most expensive hardware/software combination is the best. The bottom line is to spend some time with the system you are considering before spending your money.

At a minimum, the scanner you choose should offer duplex scanning (ability to scan both sides of the document at once); include an automatic document feeder capable of holding at least 50 sheets of paper at one time; be able to scan at the rate of 30 to 50 pages per minute; and provide crisp enough scans of the text to allow for accurate optical character recognition by the system's software. Generally, a fairly speedy duplex scanner capable of producing 200 to 300 dpi (dots per inch) scans is adequate.

Less data entry the better

A document imaging system should include the ability to drag and drop files into the appropriate folders, or better yet, find their correct place on the hard drive. There should be minimal user intervention during scanning of bar codes or optical character recognition of text contained in the document. The less data entry that is required after the scan, the more productive your employees will be.

Do not expect scanning and archiving of documents to take less time than it would normally take to file a piece of paper. Beyond the time it takes to scan and archive documents correctly, a company using document imaging technology should have an effective quality assurance process in place that calls for each scanned document to be reviewed individually to make sure it is scanned properly and is readable. While this may take extra time up front when compared to simply filing documents, it will pay off in the long run.

Productivity gains come later in the form of making documents readily accessible for referencing, and in pointing, clicking, and printing from the desktop instead of copying. One vendor of document imaging systems for HME providers estimates that it takes at least 4 minutes for an employee to locate a paper-based file and create a copy of a document. For an employee making $10 an hour, that represents approximately 67 cents' worth of labor. The same task, using document imaging, would take seconds. Figures like that make the cost saving potential of document imaging systems obvious.

If you decide to move to a more paperless process in your office, your staff members may have to change some of their documentation preparation habits. Highlighters will have to go since they show up as shaded areas on scanned documents, potentially obscuring the text underneath. Colored inks such as red and blue do not scan as well as black, so black ink will have to be the standard.

Once you make the decision to implement scanning technology and get the hardware and software, set a date after which all documents that migrate through your office will be scanned rather than simply filed away. Create scanned files that reside on a computer hard drive for all new patients instead of creating new paper files. When additional documentation is created for existing patients, use that as your cue to pull their existing file and scan it in its entirety. Last, create a list of all active patient accounts, pull the files as you are able, and get them scanned into the system. Within 6 months to a year, all your active patient files will then be scanned and archived.

Time for the Round File?
Can you truly throw away your paper files once they are scanned and archived? The CMS Program Integrity Manual clearly states that the DMERCs "must accept copied, faxed, or electronic documents," but the burden of proving the authenticity of any document during an audit still resides with the HME provider. With the proper document quality assurance review process in place, you can probably go ahead and shred all that paper once it is scanned. But if the thought of shredding original documentation is too nerve-racking, off-site storage of files in cardboard boxes is still less expensive than maintaining the files at your business, and you will still enjoy the same productivity gains when it comes to accessing and copying documents.

There is no doubt that letting go of paper files requires a whole new mind-set on the part of business owners and employees. Changing processes can be somewhat stressful for employees and managers alike, particularly when it involves a process that requires many months to fully implement. But keeping pace with technology that improves productivity and reduces costs over the long run is an absolute necessity in today's reimbursement environment.

Roberta Domos, RRT, is owner and president of Domos HME Consulting Group, a national consulting firm in Redmond, Wash. She can be reached through her Web site: www.hmeconsulting.com.

No More EOBs?
On April 15, the Region D DMERC posted a notice that CMS will eliminate paper explanation of benefits (EOBs) as of July 5, 2005. Anyone that has received electronic remittance notices (ERNs), or electronic EOBs, for more than 30 days in the ANSI 835 format will be affected. Suppliers that use a billing service that electronically downloads the ERNs will also be affected.

ERNs allow most suppliers to electronically post payments into billing software. However, suppliers have serious concerns about not having paper EOBs to track denials, perform audits, or bill secondary insurers that will not accept ERNs for payment. Unless providers already use a professional service to translate the electronic files into readable EOBs, this may result in a serious cash flow problem.

—Information supplied by Andrea Stark, Medicare consultant, reimbursement specialist, and founder of MiraVista LLC, Columbia, SC. She can be reached via e-mail: andrea@miravistallc.com.

Article Tools
» **Email This Article**
» **Reprint This Article**
» **Write the Editor**

Imaging Economics | Medical Imaging | RT | Sleep Review

Medical Education

SynerMed Communications | IMED Communications

Practice Growth

Practice Builders