



Pain Management EHR Checklist

CGM Insights | Infographic



Switching EHRs

While switching from one EHR to another is never easy, the reality is that so many practices make that decision because they are so dissatisfied with their current systems.

When considering your options for a new EHR, select a vendor that has a recognized reputation for quality, stability, and a customer-centric approach. The technology is important—it must be highly usable at the point of care and it must meet your practice's requirements—but it's also important to recognize that a new EHR vendor also brings the opportunity for a new relationship with a company that should be collaborative and friendly over the long term.

If you're thinking about changing your software, you're not alone.

Pain management physicians demand efficiency and practicality when it comes to ensuring the best for their patients.

Whether incorporating anesthesiology, neurology or pain medicine, pain management specialists understand that it requires a comprehensive approach for evaluation and treatment of patients experiencing acute, chronic and/or cancer pain.

Don't purchase an EHR that can't cater to your specialty.

Use this pain management EHR checklist to check on your current EHR software.

#1: Templates for common pain problems

Pain management EHR software needs to have workflows and templates that make sense for how you work. Look out for templates that cover:

- Joint pain
- Epidural
- Arthritis
- Back pain
- Nerve blocks
- Chronic headaches
- Infusion pump replacements
- Botulinum injections



You should be able to chart pain complaints by location, quality, activity limits, pain triggers, medications, and alleviating factors—all in a few simple clicks.

#2: MIPS participation

MIPS was designed to tie payments to quality and cost-efficient care, drive improvement in care processes and health outcomes, increase the use of healthcare information, and reduce the cost of care.

Your EHR should have a real-time MIPS dashboard so pain management practices like yours can track their progress on the fly. A MIPS dashboard provides drill-down capability into individual chart notes for total clarity into your pain specialist organizations' numerators and denominators.



Why make the switch?

If you are frustrated with the lack of user-friendliness or interoperability afforded by your current electronic health record, you join more than half of all providers in sharing the same sentiment.

What are the biggest problems that practices have with different EHR systems?

- **34%** Lack of user-friendliness
- **25%** Lack of interoperability
- **15%** Cost
- **14%** Inability to customize without vendor assistance/add-on
- **5%** Interference with patient information

Source: [Medical Economics EHR Report Card](#)

#3: Pain Management 'content'

When evaluating EHR software, look to see if your EHR or a possible new software has a library of procedural templates. For example, does it have templates for a caudal ESI or a lumbar medical branch block?

#4: Coding

To ensure efficient and accurate billing, your pain management EMR/EHR software should have the ICD-10 and CPT codes specific to the specialty easily accessible.

For example, codes like:

- Back pain (M54.9)
- Headache (R51)
- Joint pain (M25.5-)
- Limb pain (M79.6-)
- Chronic pain due to trauma (G89.21)

When we talk about easy code searching, what we really mean is that you should have the ability to search by partial code and/or by description. Does your search have code qualifiers to narrow down on what you're looking for? For example, qualifiers like chronicity or area.

Coding to the highest level of specificity is the gold standard! All these easy code searches help you not only save time, but more importantly leave less room for errors and higher chance that insurance will cover the specific code.

#5: Pain EHR analytics aka Population Health Management

Tracking the health of your patients is crucial in pain management, as many of your patients have chronic conditions, and perhaps more than one. Your EHR should be able to:

- Identify patients who need follow-up visits and schedule those visits easily within the application or mobile-app
- Follow-up on high-risk diagnoses. Is it easy to run reports wherein you can focus on a wide range of diagnoses or narrow by specificity?



- Analyze referral patterns
- Track patient outcomes
- View charges and payments
- Spot reimbursement trends

CGM APRIMA

EHR and Practice Management

About CGM APRIMA

CGM APRIMA offers a uniquely fast, flexible, and powerful EHR designed to complement and simplify your workflow.

Developed to work the way you do, CGM APRIMA frees you from the constraints of templates with an intuitive, free-flowing interface designed to follow the flow of a patient visit.

The award-winning CGM APRIMA sets the benchmark for ease of use, speed, and flexibility.



#6: Easy ePrescribing

Not every EHR makes prescribing easy. If you're still using paper to prescribe, [check out this article](#) on the dangers of manual error in paper prescribing.

e-prescribing allows for direct prescribing to pharmacies and tracking of patient doses. Renewal of prescriptions becomes as easy as the click of a button, a feature that is indispensable in cases where patients depend on medication for pain relief.

Your EHR vendor should be helping—and definitely not hindering—every aspect of your practice from charting to billing, patient satisfaction, provider happiness, and more.

Look out for easy e-prescribing features like:

- Auto refills,
- Real time benefit information
- Rxchange
- Responsive ehr
- PDMP and EPCS integration
- Real time cost and Electronic Prior Authorization
- Patient information tools
- Sorting
- Fill information

#7: Integration with Lab and imaging

With pain management practices, many require that its EHR integrates into operating monitoring machines to allow doctors to track patient progress during surgery. Your EHR program should allow for easy importing of information/results from the lab, radiology, and other tests. This reduces the need to manually import data.

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“Using CGM APRIMA, my ability to handle patients is up 30% — both volume and revenue — compared to where I was before. It’s nothing short of incredible.”

Margie Anacaya, MD

Central Arizona Pain Institute

#8: Patient engagement

Patient engagement tools and services are a must these days to ensure that patients are better managing their health. Tools like appointment reminders also drive down no-show rates and direct messaging allows for better patient satisfaction and education!

Does your software provide:

- A mobile-app
- Secure messaging
- Appointment scheduling
- Marketing tools like mass messaging

#9: Single vendor solution

Does your current software provider provide a single system? Does your vendor provide integrated PM, Lab, patient engagement tools, telehealth, and billing services?

A single vendor minimizes complexity and reduces overhead.

CGM APRIMA Integrated EHR & PM

Whether your goal is to see more patients, spend more time with family and friends, or improve the financial health of your practice, CGM APRIMA has been delivering results since 1998. Save time, improve patient care, and get paid promptly with a smarter, integrated EHR solution.

Our pain specific software offers:

- Easier data input for repetitive procedures
- Lightning fast documentation with voice-to-text and common problem templates
- Better care coordination through eprescribing, lab interfacing, and mass messaging
- And more!

[Contact us now](#) for more information!



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CompuGroup Medical's services are based on a unique customer base of more than 1.6 million users, including doctors, dentists, pharmacists and other healthcare professionals in inpatient and outpatient facilities. With locations in 19 countries and products in 56 countries worldwide, CompuGroup Medical is the e-health company with one of the highest coverages among healthcare professionals. More than 8,500 highly qualified employees support customers with innovative solutions for the steadily growing demands of the healthcare system.



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