

Success Story: Dr. Leonard A. Richardson

Responding to the opportunities opening under the Affordable Care Act, Dr. Leonard A. Richardson has transformed his medical practice. After successfully attesting to meaningful use, he received his first incentive payment in June 2012.

Dr. Richardson is the president of Kingdom Medicine and worked as an Internal Medicine/Critical Care Unit physician at Northwest Hospital in Randallstown, MD. He is also the current president of Monumental City Medical Society in Baltimore, an affiliate of the National Medical Association; president and a founding member of the Maryland Physician's Group; and current Chief of Aerospace Medicine for the 459th Aerospace Medicine Squadron at Joint Base Andrews.

A graduate of the Howard University College of Medicine, Dr. Richardson also holds a bachelor of science degree from Adelphi University and completed a joint residency training program in Internal Medicine at Michigan State University, Kalamazoo Center for Medical Studies and Howard University Hospital.

After serving with distinction in the United States Air Force, he later served at Andrews Air Force Base with the 459th Aeromedical Staging Squadron, leading a unit that provided supportive and emergency medical care for war casualties.

As Dr. Richardson faced the mandate to implement an ONC/ARRA "Meaningful Use" certified Electronic Health Record (EHR) system and attain Stage I reporting, his Kingdom Medicine practice was already fully outfitted with computers, successfully incorporating a Practice Management system and utilizing the DrFirst e-prescribing system. Selection of an electronic health

record system was underway.

Although he had thought ahead of the curve, not all of the practice's equipment was certified. His challenge was to "marry the systems" already in use in the practice with systems certified for the new requirements. Facing an "incredibly complex process, a daunting path," required learning new concepts, such as the timelines for registration and attestation. What were the parameters for getting to Meaningful Use? What were these numerators and denominators?

He likens the process to "building an airplane while flying." Anticipating that nine months to year of workflow would be impacted, Dr. Richardson decided that he needed a credentialed guide—not just for EMR selection but also to understand the process ahead, from beginning to end. He found that assistance with an MSO, ZaneNet Connect.

During the implementation process, colleagues, staff and vendors had to be brought along. He wanted them to see that this new way was "how medicine was meant to be." With the right people on the bus, the question remained of "how to drive." The rules were just being written; it was a cutting-edge problem, risky and time consuming. And the practice remained always responsible for its patient information, which could be audited by insurers and payors, while learning to input that data into the new system. It was stressful.

Eventually, as the process continued, gains were evident. "I've noticed that



after nine months you see efficiency gains, comprehensive notes for reimbursements, fewer errors, real-time reporting technologically integrated with HIE, patients come in on time. The practice is more efficient, effective."

For Dr. Richardson, the greatest payoff has been the increased efficiency throughout the practice. He sees more patients and finds that patient satisfaction is up. The practice receives better reimbursement, prescriptions are more accurate and easier to get, and it is possible to print out graphs, reports and demographic information, with no handwriting needed. He regrets that, to date, the HIE is not integrated with the practice's electronic health records system.

For the future, Dr. Richardson sees that modern medicine is constantly evolving. "If you stay at the front, additional initiatives will happen. Expect to continue to improve, apply for incentives, have a payor plan and have the documentation."

As for the changes so far, "I have learned you need patience—a virtue for implementation and Meaningful Use. Be amenable to personnel changes; find the right people. Be committed to seeing it through to the end." He declares that the trip has been "frustrating, exhaustive, but of tremendous benefit."