EMR Archiving, Database Purging, and EMR Migrations Best Practices



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Learning Objective

We will discuss all the times and ways you might move data and how an archive solution can benefit your organization.

Some of the reasons to migrate or Archive your data include: If you need to merge a newly acquired clinic's data into your host database. If you need to split out some data for a retiring provider or for a group that needs to split their database. Do you just need to split a database into two?

Is your database full of old records and you want to archive the old records and delete them out of CPS. This will increase performance and require fewer resources for your daily backup. And if you need to reload the data from some of the patients you previously purged, you can selectively reload that data. Are you maintaining old legacy EMRs that are costly and a hardware challenge?

This talk will describe how each of these scenarios have been used in Centricity and non-Centricity clinics. How you can prepare for a migration project. What you can expect and where to watch for problems.



PLEASE ASK QUESTIONS

This is an open forum So don't be shy

Moving clinical data around your organizations:

There are numerus reasons to work with EMR clinical data

Migrate data to a new EMR

- Merge databases (purchase a clinic)
- Purge your old records from your EMR

Database/Storage clean-up

Split databases (data divorce)

 Shrink your production database to improve performance

 Convert a multiple patient chart database into a single shared chart model

Archival of records



What data elements can I move?

- Advanced Directives
- ► Allergies substance and incidents
- ► CCDA's
- Clinical Summary Documents (PDF)
- External Documents All scanned files and images from EMR or PM
- Immunizations values and links to documents
- Internal Documents any chart update that does NOT have a paperclip
- Medications prescriptions and refills
- Observations including Lab results, vitals and histories values and links to documents
- Orders
- ► PM Data including Demographics and financial summaries
- Problems diagnoses and assessments



What are some of the different data transfer methods

- CCDA export with reconciliation utility
- Custom Migration utilities
- Custom SQL scripts
- Database duplication with a purge of records from each DB
- Direct Table Migration between the same database platforms
 - "CPS to CPS" or "CPO to CPO"
- ► FHIR API's
- ► MDEMR PMAD loader utility "Problem, Medications, Allergies and Directive" reconciliation utility for Centricity clients



Many reasons to migrate your data to a new EMR

- A physician is leaving an existing practice and is moving his charts to a new EMR
- Your Old EMR is no longer adequate to your needs
- Your Old EMR cost of maintenance and ownership is too expensive
- Your EMR vendor is going out of business
- Your clinic or Health system acquires a new clinic
- You decide to consolidate multiple EMR platforms into one to reduce support/maintenance costs
- Your Hospital Management requires a change to an integrated HIS/EMR platform
- You sometimes need to find a new EMR vendor



Questions you should ask your self when migrating data to a new EMR

- Are you migrating to/from a cloud platform?
- Do you have time to complete a full migration before going live on your new EMR systems
- Do you want to store all of your old records in your new EMR database?
- Do you need to incorporate an MPI for duplicate patients?
- How will the data look in my new EMR?
- Should you move your data to an archive to speed up the on-boarding process in the new EMR
- What is your QA process!



Why would you split a database (Data Divorce)

- Some of the providers leave to join or form a new practice and need a copy of their patient records
- You decide to restructure your environment into separate DB instances
- One of your providers retires and wants to take there data with them or transfer it to new custodian of record



Questions you should ask your self when you decide to split a database (Data Divorce)

- Are you simply going to duplicate the DB and then purge the records from each?
- What are you going to do with you're AR?
- What EMR/System is it going to migrated too?
- Will the charts need to be purged from the source system?
- Will you migrate the full records or just what is legally required?
- Will the source database retain a copy of the records?



Reasons to Purge or Archive patient records

- The Database is loaded with thousands of patient charts that have not been seen in years!
- Improve the <u>functionality</u> of the database by purging the older records and moving them to an archive.
- A Provider is leaving the practice and you need to remove his patients from your production system
- You have an OLD legacy EMR that you are still paying support and maintenance fees to the EMR vendor
- Your moving to a new EMR and want to sunset your full/partial EMR versus migrating the full records to the new EMR.



Purge Options with Centricity CPS clients

Full removal of all clinical data from EMR and external file repository

Partial removal of the PM data

Obsoleting of the PM charts at the completion to hide them from the patient active search function

Flag Entry in the CPS database that will notify staff if a patient has been archived



Purge Options with Centricity EMR clients

Full removal of all clinical and demographic data from EMR and external file repository

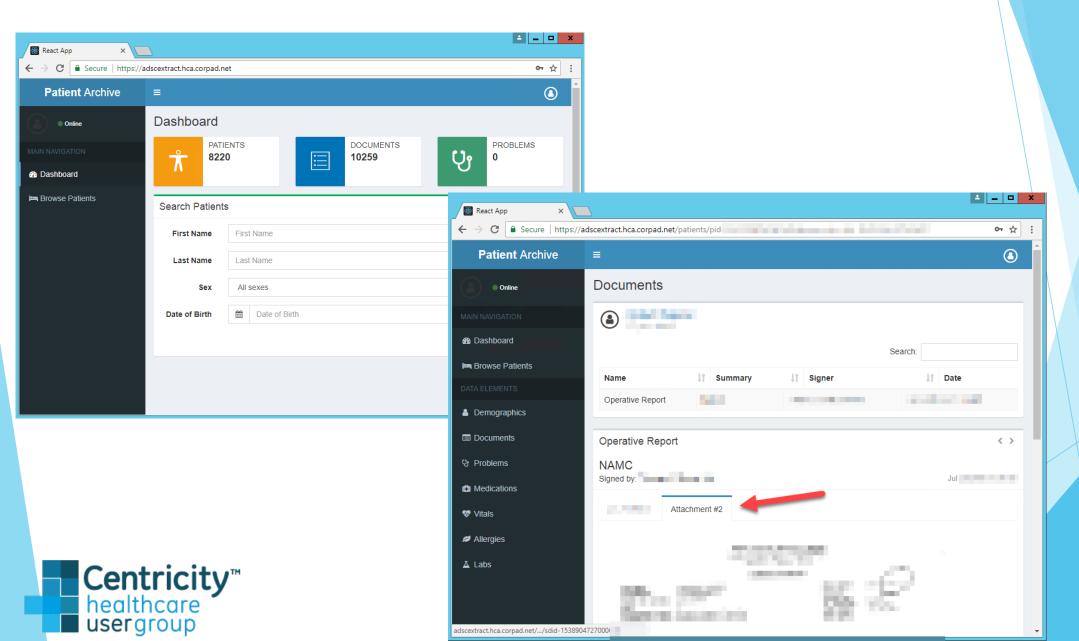


Recommended Purge schedules

- Initial purge to remove any patients not seen in last 7 years
- Purge any patient that is set to obsolete, merged or inactive
- Periodic purges every 1-3 years based on the size of your database and patient count
- Since all records are stored in the Archive, they can easily be viewed within the EMR via the EMR Links
- Patient Records are easily accessible for printing back into the EMR
- Reporting is also available via any FHIR reporting tools



The MDEMR Archive Product



Archive Features

- Easily view and access all records that are stored in the archive within the EMR chart via the EMR links tab or via a web link in your browser
- Patient records are easily accessible for printing back into the EMR
- Data in archive can be queried by any person or program with the ability to interact with a FHIR API
- Discreet data elements that are available within their own module: Problems,
 Medications, Allergies, Labs, and Vitals
- Integrated with active directory/LDAP
- Ability to restrict user chart view access based on LOC

