## **Traditional Workflow**

Patient # 123...<sup>®</sup> better data in less time

Traditional healthcare workflow includes:

- 1. Obtaining and documenting a patient's <u>History</u>
  - a. Medical
  - b. Present Illness
- 2. Performing and recording Physical Exam
- 3. Recording the Evaluation of health status
- 4. Implementing and recording Management

In this scenario, the Provider requires an average of 15 minutes of time per patient and the practice is paid \$70 per patient. The hourly rate of gross income production by the Provider is \$280/hour and illustrated in the Cost-Benefit Analyzer.

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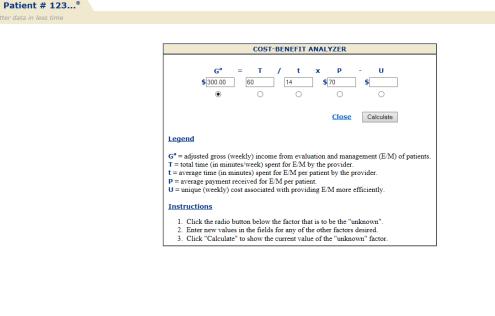
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## **Efficient Workflow**

If the time required to <u>obtain</u> the history in the previous scenario could be reduced by one minute per patient, the rate of income production per hour would increase from \$280 to \$300 ( $60/14 \times $70$ ). This assumes that the \$20 per hour was gained by obtaining a history more efficiently without incurring any associated ("unique") cost.

If the Provider performed Evaluation and Management (E/M) services 30 hours a week for 48 weeks out of a year, the gain in annual income from improved efficiency would be \$28,800 ( $$20 \times 30 \times 48$ ).

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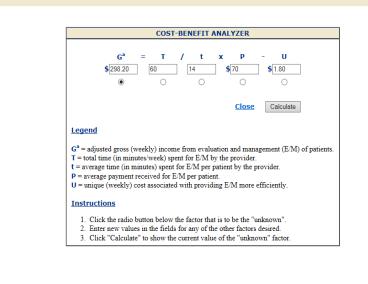
# **Cost-Effective Workflow**

In this scenario, one minute of data-entry per patient that had been performed by the Provider is instead performed by a staff member. The compensation for the staff member totals \$25/hour or \$0.42/minute.

The Provider's productivity is at the rate of 300/hour since 14, rather than 15, minutes are spent per patient. The one minute of dataentry by the staff per patient would cost the practice 1.80 for the 4.29 (60/14) patients the provider now interacts with per hour. The net gain in income per hour would be 298.20 (300 - 1.80) which would be 18.20 greater than that earned when the provider spent 15 minutes per patient. The annual gain in income would be 26,208 (18.20/hour x 30 hours/week x 48 weeks per year).

### Patient # 123...®

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