



Case Study

MAY 2018 | CASE STUDY

AN INVESTIGATOR-CENTRIC EMR

Dr. Clark of Charlottesville Medical Research Center discovered that CRIO is unlike the EMR he had in his medical practice that used to slow him down. CRIO has enabled him to save time, improve the performance of his site, and earn multiple levels of return. Overall, he spends less time in CRIO than he did in the EMR, and the time spent is much more value added.

From medicine to clinical research

From 1997 to 2015, Dr. Clark operated a solo Internal Medicine practice in Charlottesville, VA. In 2013, to avoid Medicare pricing penalties, he moved his practice from paper charts to Electronic Medical Records (EMR).

The EMR system ended up creating more work for Dr. Clark. The EMR workflow was unintuitive and tedious. Under heightened insurance scrutiny, he found himself writing much more detailed notes to justify billing procedures. He'd finish clinic at 5:00, then work until 8:30 documenting in the EMR.

During this time, Dr. Clark was a part-time Investigator at Charlottesville Medical Research Center. In 2016, he quit medicine, purchased the research site, and became a full-time Investigator and site owner.

Going electronic with CRIO

Dr. Clark's site ran smoothly. His site was considered a high performer. As a full-time Investigator, Dr. Clark was always available to see patients, write and sign notes, meet CRAs, and oversee trials. He saw little reason to change.

Thus, when one of his staff members suggested he look at CRIO, his first reaction was "No way!" After hearing his colleague's enthusiasm, he cautiously entertained a demo.

"I was really impressed with how intuitive the system was," said Dr. Clark. "It was clearly built with a deep understanding of a research site's needs."

Cautious from his EMR experience, Dr. Clark performed extensive due diligence. He attended a workshop hosted by CRIO and spoke with several CRIO clients. Even then, he struggled with justifying the cost associated with CRIO.

Finally, Dr. Clark decided to take the plunge. He signed up for CRIO's monthly CTMS module and opted for the pay-as-you-go pricing plan on eSource, giving him the flexibility to scale back if it didn't work out.

Within months, Dr. Clark's enrolling studies were all on the CRIO system. "My only regret," said Dr. Clark, "is that I didn't listen and jump in earlier."

Not your typical EMR

Dr. Clark's experience with CRIO was radically different from his experience with EMR systems.

The contrast with EMR starts with the fundamental purpose of each system. CRIO's goal is to make research seamless. It does not add or create new workflows; instead, it facilitates them by automating the repetitive tasks. EMR systems, on the other hand, came about in the context of a strong government-led push to control costs; it introduces new workflows and is designed to standardize medical practices and coding.

"With CRIO, I really feel like I'm in control of my operation versus an EMR controlling me and my operation," said Dr. Clark. "CRIO makes it like an air traffic controller overseeing, from one location, several studies occurring at the same time. EMR, on the other hand, was disempowering and always made me feel like I had no control".

Unlike with the EMR, Dr. Clark spends only an hour per day in CRIO, and he spends that hour performing true oversight. "Before CRIO, for instance, I would instruct the coordinator to do something and hope she did it. Now, I can log in and make sure all procedures are completed per Protocol because all source documents are in front of me and not down the hall in someone else's office. I can review the data several times over the course of the trial, ensuring continual oversight."

CRIO vs. Electronic Medical Record system

	<i>CRIO</i>	<i>EMR</i>
<i>Industry</i>	Clinical research	Health care delivery
<i>Purpose</i>	Empower Investigators	Enable cost control and insurance and regulatory oversight
<i>Physician hours per day</i>	1.0	3.5
<i>How time is spent</i>	Management / oversight	Note-taking

Paying for itself many times over

Dr. Clark says the system pays for itself many times over.

First, it has freed up time to spend on recruiting. With CRIO, the coordinators are done with data collection when the visit is over. Because of that, they are re-allocating time towards recruiting. They call and screen previous research patients they have relationships with. This augments recruiting capacity and leverages the coordinators' knowledge and personal relationships. As a result, Charlottesville Medical Research recruits more patients per study.

Second, it has enabled his site to take on more studies. Before, Dr. Clark would sometimes turn away studies because he was at capacity. "With CRIO, I save so much time that sometimes at 3 pm I'm looking for things to do," he said. "Now, I have capacity to take on more studies, and I don't have to turn away something that could otherwise be financially rewarding."

Third, it has strengthened his value proposition with sponsors. Since using CRIO, Dr. Clark reports that the CRAs have all been very positive about it. Most of the time, when they are issuing queries, Dr. Clark answers them in real-time. "There are times when the monitors leave and we literally have no follow-ups," said Dr. Clark. "My monitors are telling me they want to work with our site in the future. That will give me an edge on site selection for the next study."

Fourth – and most significantly for Dr. Clark – the system provides peace of mind. "In research, one error can cause a lot of bad consequences like an audit, loss of business, etc. With CRIO, I know I have a much lower chance of something like that happening. I can go to sleep at night knowing we have quality under control. This is my livelihood, so there is no price tag to that peace of mind."

Conclusion

To physicians who may be struggling with the upfront investment required for CRIO, Dr. Clark offers this advice: "There is no 'cost' to this. You simply cannot do research effectively without CRIO. Though we were a very good site, having CRIO has made us a fantastic site on so many different levels, and that's priceless."

ABOUT THE PROFILE



Dr. James Clark completed his residency in Internal Medicine at the University of Virginia followed by a fellowship in Primary Care Sports Medicine at the Cleveland Clinic. He moved to Charlottesville in 1997 where he was in private practice and was the President of Medfit Wellness Center, a full-service wellness center. In 2002, Dr. Clark became an investigator for Charlottesville Medical Research Center and has completed over 100 clinical trials. In 2016 he assumed the role of Owner and Medical Director of the site.