



## PHYSICIAN OFFICE CLINICAL MANAGEMENT SYSTEMS

A Survey of Forty-Seven Primary Care Physicians and Specialists

Panel Intelligence, LLC  
April 2008

### STUDY DESCRIPTION

<b>Topic</b>	Physician Office Clinical Management Systems
<b>Respondent Type</b>	Physicians who do NOT use CMS
<b>Specialties Covered</b>	Primary care physicians/internists and assorted office-based specialists
<b>Region</b>	United States Only
<b>Methodology</b>	Online survey, self-administered via a Panel Intelligence website Duration: 20 minutes Size: 47 respondents Fielding Dates: April 8-15, 2008

### OBJECTIVES

*To understand physician purchasing patterns with regard to in-office clinical management systems.*

- Determine influence of economy (including lessening availability of credit) on physician office spending generally, and with regard to clinical management systems; determine priority items.
- Quantify spending in comparison to previous year.
- Determine extent and timing of hospital involvement in selection and purchasing of physician office clinical management systems in the context of recently relaxed Stark Laws.
- Understand need for compatibility with hospital systems.
- Understand purchase and leasing models and prevalence of each.
- Measure product perception, switching behavior, and barriers to switching/sticky-ness.
- Compare and contrast products (including product recommendations).
- Understand future purchasing/upgrades/potential to upgrade product modules.

### KEY FINDINGS

- **Purchase Rates Differ by Group.** 40.4% of non-users of CMS expect to purchase within three years; 30.9% of users expect to either upgrade or purchase in the same timeframe.
- **Non-Users of Clinical Management Systems Describe Impact of the Economy on Decision-making .** 76.6% of non-users of CMS said that difficult economic times discourage physician office interest in purchase of CMS, compared to 54.5% of current CMS users.
- **Non-Users Perceive Greater Hospital Support for CMS Adoption.** Non-users of CMS who believe that hospitals are contributing to CMS adoption think that they contribute 39.2% of cost, compared to the users who think they contribute only 20.3%.

## INCLUSION CRITERIA AND RESPONDENT DEMOGRAPHICS

<b>Inclusion Criteria</b>	<ul style="list-style-type: none"> <li>▪ US-based</li> <li>▪ 2 to 30 years of experience post-training</li> <li>▪ Minimum of 75% professional time spent in clinical practice</li> <li>▪ DO NOT use in-office clinical management systems and familiar with these systems</li> </ul>
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### Question S1

What is your primary medical specialty?

n = 47	% of Respondents	Number of Respondents
Internal Medicine	40.4%	19
Family Practice	6.4%	3
Office-based specialist (e.g. neurology, gastroenterology, etc.)	53.2%	25

### Question S2

What is your primary work setting?

n = 47	% of Respondents	Number of Respondents
Solo Private Practice	46.8%	22
Group Private Practice	53.2%	25

### Questions S3

What percentage of your professional time is spent in clinical practice?

n = 47	Mean	Median	Minimum	Maximum	Standard Deviation
Professional time is spent in clinical practice	96.7%	100%	80%	100%	5.5%

### Question S4

How long have you been in practice post-training?

n = 47	Mean	Median	Minimum	Maximum	Standard Deviation

<b>Years in practice post-training</b>	15.4	15	4	28	7.1
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**Question S5**

Does your practice use Clinical Management System (CMS) software?

<b>n = 47</b>	<b>% of Respondents</b>	<b>Number of Respondents</b>
<b>No</b>	100.0%	47

## SECTION ONE: PRACTICE BACKGROUND AND SPENDING TRENDS

### Question Q1

Based on patient volume, how busy is your practice today compared to the same time last year?

n = 47	% of Respondents	Number of Respondents
More than 20% busier than before	12.8%	6
Between 15% and 20% busier than before	12.8%	6
Between 10% and 14% busier than before	17.0%	8
Between 5% and 9% busier than before	12.8%	6
Between 2% and 4% busier than before	8.5%	4
Similarly busy (Less than 2% more busy or less busy)	21.3%	10
Between 2% and 4% less busy than before	2.1%	1
Between 5% and 9% less busy than before	4.3%	2
Between 10% and 14% less busy than before	4.3%	2
Between 15% and 20% less busy than before	2.1%	1
More than 20% less busy than before	2.1%	1

### Question 2a

How does the routine operational spending in your practice from March 2007 – March 2008 compare with the amount spent between March 2006 and March 2007?

Trend in routine operational spending n = 47	% of Respondents	Number of Respondents
More than 20% than previous year	4.3%	2
Between 15% and 20% more than previous year	10.6%	5
Between 10% and 14% more than previous year	21.3%	10
Between 5% and 9% more than previous year	14.9%	7
Between 2% and 4% more than previous year	27.7%	13
Similar to previous year (less than 2% more or less spending)	19.1%	9

Continued...

Between 2% and 4% less than previous year	0.0%	0
Between 5% and 9% less than previous year	0.0%	0
Between 10% and 14% less than previous year	0.0%	0
Between 15% and 20% less than previous year	0.0%	0
More than 20% less than previous year	2.1%	1

### Question 2b

How does the capital spending in your practice from March 2007 – March 2008 compare with the amount spent between March 2006 and March 2007?

Trend in capital spending n = 47	% of Respondents	Number of Respondents
More than 20% than previous year	4.3%	2
Between 15% and 20% more than previous year	4.3%	2
Between 10% and 14% more than previous year	14.9%	7
Between 5% and 9% more than previous year	10.6%	5
Between 2% and 4% more than previous year	19.1%	9
Similar to previous year (less than 2% more or less spending)	40.4%	19
Between 2% and 4% less than previous year	2.1%	1
Between 5% and 9% less than previous year	0.0%	0
Between 10% and 14% less than previous year	4.3%	2
Between 15% and 20% less than previous year	0.0%	0
More than 20% less than previous year	0.0%	0

### Question Q3

Please rank the following areas in the order in which cutbacks would occur

n = 47	Mean Rank
Operational spending: less expensive supplies or less use of supplies	2.9
Capital spending: scale back purchase of IT equipment / computer hardware	3.9
Capital spending: scale back software purchases / upgrades	3.9
Operational spending: reduce staffing / use less expensive staffing	3.9
Operational spending: less use of outside services	3.9
Capital spending: reduce facility/building/office upkeep	4.5
Operational spending: reduce hours of operation	5.0

### Question Q4

Please rate your perception of the current state of the US national economy

n = 47	Mean	Negative (1-3)	Neither Negative or Positive (4)	Positive (5-7)
Percentage of perception of the current state of the US national economy	3.0	66.0%	21.3%	12.8%

### Question Q5

In your opinion, is your practice's caseload or profitability affected by difficult economic times?

n = 47	Strongly impacted by the economy	Somewhat impacted by the economy	Little to no impact from the economy
Caseload	19.1%	59.6%	21.3%
Profitability	36.2%	48.9%	14.9%

**Question Q6**

Is your practice's purchasing or leasing of Clinical Management Systems affected by **difficult economic times**?

n = 47	% of Respondents	Number of Respondents
Encourage physician office interest in purchase of CMS	4.3%	2
Discourage physician office interest in purchase of CMS	76.6%	36
Does not affect physician office interest in purchase of CMS	19.1%	9

n = 47	% of Respondents	Number of Respondents
Increases sensitivity to CMS price	72.3%	34
Decreases sensitivity to CMS price	8.5%	4
Does not influence sensitivity to CMS price	19.1%	9

n = 47	% of Respondents	Number of Respondents
Encourages upgrades to existing CMS systems	14.9%	7
Discourages upgrades to existing CMS systems	57.4%	27
Does not influence the decision to upgrade	27.7%	13

n = 47	% of Respondents	Number of Respondents
Encourage leasing/ASP models over purchasing	48.9%	23
Encourage purchasing over leasing/ASP models	6.4%	3
Neither	44.7%	21

**Question Q7**

Does the existing 'credit crunch' in the financial markets (lessening of availability of loans/financing and/or more challenging interest rates) hinder your ability to purchase capital equipment? Does it affect your purchasing/upgrading of CMS in your office?

**Does the credit crunch affect your ability to make capital purchases?**

n = 47	% of Respondents	Number of Respondents
<b>Yes, it hinders my ability to make capital purchases</b>	51.1%	24
<b>No, it does not affect my ability to make capital purchases</b>	48.9%	23

**Does the credit crunch affect your purchasing/upgrading of CMS systems?**

n = 47	% of Respondents	Number of Respondents
<b>Yes, it affects purchasing/upgrading</b>	48.9%	23
<b>No, it does not affect purchasing/upgrading</b>	51.1%	24

## SECTION TWO: SELECTION OF CLINICAL MANAGEMENT SYSTEMS

### Questions Q10

In the context of newly relaxed Stark Laws which now allow hospitals to financially assist physicians in adopting CMS/Electronic Medical Records: In your experience, and more broadly around the country, are hospitals currently assisting physician offices financially with CMS purchases or upgrades?

#### In my personal experience

n = 47	% of Respondents	Number of Respondents
I would expect an affiliated hospital to currently contribute _____% of the cost of any such system I would consider purchasing	29.8%	14
I would not expect an affiliated hospital to contribute to the cost of any such system I would consider purchasing	70.2%	33

#### Personal Experience hospital expected contribute

n =14	Mean	Median	Minimum	Maximum	Standard Deviation
% of the cost of any such system I would consider purchasing	42.5%	50%	0%	90%	24.2%

In the context of newly relaxed Stark Laws which now allow hospitals to financially assist physicians in adopting CMS/Electronic Medical Records: In your experience, and more broadly around the country, are hospitals currently assisting physician offices financially with CMS purchases or upgrades?

#### Based on what I have seen and heard.

n = 47	% of Respondents	Number of Respondents
Hospitals are currently contributing _____% of the cost of such systems	31.9%	15
Hospitals are not currently contributing to the cost of such systems	68.1%	32

#### Based on what I have seen and heard.

n = 15	Mean	Median	Minimum	Maximum	Standard Deviation
Currently contributing % of the cost of any such system	39.2%	50%	0%	85%	22.9%

In the context of newly relaxed Stark Laws which now allow hospitals to financially assist physicians in adopting CMS/Electronic Medical Records: In your experience, and more broadly around the country, are hospitals currently assisting physician offices financially with CMS purchases or upgrades?

In the short-term (3-9 months), how likely are you to purchase a CMS system on the basis of the relaxation of the Stark Laws?

n = 47	% of Respondents	Number of Respondents
<b>I am more likely to purchase a CMS system in the short-term</b>	14.9%	7
<b>I am less likely to purchase a CMS system in the short-term</b>	12.8%	6
<b>I am no more or less likely to purchase a CMS system in the short-term</b>	38.3%	18
<b>I did not plan to purchase a CMS system in the short-term and have not had a change in plans</b>	34.0%	16

In the context of newly relaxed Stark Laws which now allow hospitals to financially assist physicians in adopting CMS/Electronic Medical Records: In your experience, and more broadly around the country, are hospitals currently assisting physician offices financially with CMS purchases or upgrades?

In the long-term (9 months - 2 years), how likely are you to purchase a CMS system on the basis of the relaxation of the Stark Laws?

n = 47	% of Respondents	Number of Respondents
<b>I am more likely to purchase a CMS system in the long-term</b>	29.8%	14
<b>I am less likely to purchase a CMS system in the long-term</b>	17.0%	8
<b>I am no more or less likely to purchase a CMS system in the long-term</b>	31.9%	15
<b>I did not plan to purchase a CMS system in the long-term and have not had a change in plans</b>	21.3%	10

### Questions Q11

Again, in the context of newly relaxed Stark Laws which now allow hospitals to financially assist physicians in adopting CMS/Electronic Medical Records, how much, if at all, does the hospital (or hospitals) with which you have referral relationships influence your selection of a CMS?

<b>n = 47</b>	<b>% of Respondents</b>	<b>Number of Respondents</b>
<b>Must purchase same brand of system as hospital</b>	10.6%	5
<b>Must purchase a compatible product, but not necessarily the same brand</b>	27.7%	13
<b>Strongly encourage purchase of a compatible brand, but not required</b>	23.4%	11
<b>Hospital's system does not influence our CMS selection/decision-making</b>	38.3%	18

## SECTION THREE: PRODUCT PERCEPTION

### Questions Q13

Please rate your overall impression, based on your experiences and experiences of your friends and colleagues, with the following company's CMS products

Overall Impression n =47	Mean	% Negative (1-3)	% Neutral (4)	% Positive (5-7)	% Cannot Evaluate
<b>A4</b>	4.2	4.3%	21.3%	12.8%	61.7%
<b>Allscripts</b>	5.0	4.3%	17.0%	44.7%	34.0%
<b>Athenahealth</b>	4.0	10.6%	17.0%	17.0%	55.3%
<b>Cerner</b>	4.2	12.8%	14.9%	17.0%	55.3%
<b>CPSI</b>	4.2	4.3%	23.4%	6.4%	66.0%
<b>Dairyland</b>	4.1	4.3%	14.9%	8.5%	72.3%
<b>eClinicalWorks</b>	4.9	2.1%	19.1%	31.9%	46.8%
<b>Eclipsys</b>	4.6	2.1%	23.4%	21.3%	53.2%
<b>EPIC</b>	4.9	4.3%	14.9%	31.9%	48.9%
<b>GE/IDX</b>	4.4	6.4%	21.3%	17.0%	55.3%
<b>McKesson</b>	4.7	4.3%	21.3%	23.4%	51.1%
<b>Misys</b>	4.3	6.4%	21.3%	14.9%	57.4%
<b>NextGen</b>	4.8	4.3%	19.1%	27.7%	48.9%
<b>Sage</b>	4.2	2.1%	27.7%	8.5%	61.7%
<b>Siemens</b>	4.8	4.3%	14.9%	21.3%	59.6%
<b>VitalWorks</b>	4.1	2.1%	23.4%	8.5%	66.0%

### Questions Q15

Do you expect to purchase a new CMS system, or upgrade the current CMS system, within the next three years?

n = 47	% of Respondents	Number of Respondents
<b>Yes</b>	40.4%	19
<b>No</b>	59.6%	28

### Questions Q16

Which new system are you considering installing (including an existing system that you might be considering upgrading, if appropriate):

Base: Expect to purchase a new CMS system, or upgrade the current CMS system, within the next three years

(n = 19)

ID	Verbatim
1	Do Not Know Yet
3	Allscripts Or Next
11	Vital works
15	Nextgen
18	Nextgen
21	Mckesson
22	Price And Effectiveness
23	Epic
27	Allscripts But Have Just Begun Looking
29	Allscripts
30	Allscripts Or Mckesson
31	Cerner
32	I Have Altapoint For Billing And They Have A Very Reasonable Emr Add On, But I Am On The Committee At The Hospital That Works With Cerner Power chart And If I Got A Very Good Deal To Use Theirs, I Would. Or If Hospital Settled On A Preferred Vendor And Gro
33	N/A
34	Still Considering In Our Meetings , No Definite Plan Yet
36	Perkinje
38	No Decision Made At This Time.
41	Siemens
46	Nextgen Is The System We Have Been Looking At For The Most Part But Allscripts Also Has Been An Option.

### Questions Q17

Please provide your best estimates when you anticipate your practice will make the purchase or upgrade.  
 Base: Expect to purchase a new CMS system, or upgrade the current CMS system, within the next three years

n = 19	% of Respondents	Number of Respondents
2008	10.5%	2
2009	36.8%	7
2010	52.6%	10

### Questions Q18

Why do you anticipate no purchases or upgrades in the next three years?

Base: I don't expect to purchase a new CMS system, or upgrade the current CMS system, within the next three years

(n = 28)

ID	Verbatim
2	Have free EMR and practice mgmet software already. No upgrades necessary on my part.
4	No need
5	Why throw out money and add more aggravation to my life?
6	With the current patient load not being as heavy as we would like, I do not feel that EMR would be of much benefit
7	Not ready unless mandatory
8	Practice is not ready.
9	The cost and not sure which to purchase. Each one that we have looked at has pluses and minuses for Ophthalmology. What looks good one day, turns out to not be so good the next.
10	See no return on cost and time needed to implement
12	Cannot afford
13	Cannot afford
14	Financial restraints vs. value of having the system
16	Not cost effective in this economy
17	No need
19	Money is tight right now
20	No need
24	Not necessary in our current practice
25	Yes
26	GE
28	Money

**Continued...**

35	Cost
37	Price
39	Cannot afford to
40	Very new system now
42	1. There is no standard. 2. way too expensive. My margins are thin enough as it is. 3.I've used them in other offices and it significantly slows me down. 4. I don't want to incur more IT costs. 5. Most software packages have recurring costs that I can't
43	I prefer to stay with written progress notes, until such time, if that should come to pass, that EMR is mandated by state of federal law.
44	Ok with present system
45	Capital funds
47	Costs too much

**Questions Q19a**

Please rate the ease or difficulty of switching vendors once you have committed to one vendor.

n = 47	Mean	% Difficult (1-3)	% Neutral (4)	% Easy (5-7)
<b>Ease or difficulty of switching vendors once you have committed to one vendor</b>	3.3	44.7%	36.2%	19.1%

**Questions Q19b**

Please elaborate as to why you made your selection above. (n=47)

ID	Verbatim
1	Changing the software
2	Do not plan to change vendors
3	Extremely difficult to change since a lot of time and money invested in the system, and it is very disruptive to change
4	Business is business
5	I have no intention of getting suckered into a system that will probably not work and cost me a fortune.
6	Compatibility of equipment
7	Cross compatibility is not standardized yet and it should be
8	We had some problems switching scheduling/billing software.
9	Systems do not appear to be compatible.
10	Huge investment of time to imp

**Continued...**

<b>11</b>	We get what we want from whom we want.
<b>12</b>	It was difficult for my brother in law who is a physician who had to change companies
<b>13</b>	Software changes
<b>14</b>	Human habit
<b>15</b>	Extremely pleased with Nextgen associated with our billing service.
<b>16</b>	Incompatible software issues
<b>17</b>	Once capital has been expended, the up front cost would be higher
<b>18</b>	Ongoing process, too early to tell and you don't have that listed as an option
<b>19</b>	Learning curve for new material
<b>20</b>	Some inconveniences
<b>21</b>	Need to interface hospital systems
<b>22</b>	Loyalty
<b>23</b>	Difficult to switch due to agreements.
<b>24</b>	Had to pick a choice, not applicable was not a choice
<b>25</b>	Contract
<b>26</b>	Great support
<b>27</b>	Major issues are cost and response time. Getting to know each other
<b>28</b>	Bureaucracy
<b>29</b>	I can switch as I need to.
<b>30</b>	Switching is always very difficult. We often lose much of the old data.
<b>31</b>	Unable to say yet since no commitment yet made
<b>32</b>	Just going electronic is bad enough, I had Med
<b>33</b>	Loyalty
<b>34</b>	Involvement of lot of people
<b>35</b>	Ill At Ease With Computers
<b>36</b>	Training for staff
<b>37</b>	Assumption
<b>38</b>	Past experience with billing and practice management systems has convinced me that transitioning from one vendor to another is extremely difficult, with few vendors offering a reasonable migration path.
<b>39</b>	It Would Entail Changing And Reassessing All Our Needs And Comparing Them
<b>40</b>	Compatibility limits vendor candidates and geography limits # of potential vendors
<b>41</b>	Not hard but more costs with switching

**Continued...**

42	There is always a catch. Never can believe what the vendors tell you. There is always a glitch (that of course can be fixed with more capital)
43	In the past, when I had to switch computer systems (when I had to switch billing companies), I found it to be a frustrating, time
44	Difficult to transfer software and train staff
45	Loyalty
46	Not fully aware of all the issues involved in switching vendors once a system has been purchased.
47	That's just the way it is.

**Questions Q20**

What, if anything, do you view as the greatest barrier to switching from one CMS product to another?  
(n=47)

ID	Verbatim
1	Time and practice
2	Compatibility
3	Need to train on a new system and cost involved including time and money
4	Portability of the software data systems from one type to another
5	I wouldn't buy such a system let alone switch from one vendor to another.
6	Advances in technology
7	Standardization
8	Data transfer.
9	Cost and incompatibility.
10	Time
11	No
12	Inputting charts
13	Money
14	Human habit to not desire change or cause "problems"
15	Uncertainty after staff trained/happy with present system
16	Cost
17	Cost
18	Slow clinics as additional time is needed to enter data
19	Learning curve to educate staff
20	Time consuming

**Continued...**

<b>21</b>	Cost
<b>22</b>	Na
<b>23</b>	Prior contracts.
<b>24</b>	Inertia
<b>25</b>	Contract
<b>26</b>	Cost
<b>27</b>	Cost
<b>28</b>	Programming
<b>29</b>	Transmigration of data
<b>30</b>	Interchangeability, loss of data
<b>31</b>	Training and cost to implement
<b>32</b>	Conversion on data and not being able to migrate it easily or talk to the hospital systems
<b>33</b>	Na
<b>34</b>	Involvement of lot of people
<b>35</b>	Logistics
<b>36</b>	Purchasing new hardware
<b>37</b>	Uniqueness
<b>38</b>	Few vendors provide a mechanism to make this transition and to transfer patient data.
<b>39</b>	COST
<b>40</b>	Cost and support
<b>41</b>	Hardware change
<b>42</b>	Cost. no proof of greater profitability or patient care.
<b>43</b>	Lost data in the transfer
<b>44</b>	Cost
<b>45</b>	Familiarity
<b>46</b>	Cost would be the primary issue.
<b>47</b>	Moving data over

### Questions Q21a

In the context of newly relaxed Stark Laws which now allow hospitals to assist physicians adopt CMS/Electronic Medical Records; please rate the amount of interaction and collaboration with hospital colleagues during the selection process and the extent of their involvement.

n = 47	Mean	% Weak Interaction (1-3)	% Medium / Neutral (4)	% Close Interaction (5-7)
<b>Amount of interaction and collaboration with hospital colleagues during the selection process and the extent of their involvement.</b>	3.4	46.8%	12.8%	40.4%

### Questions Q21b

Please elaborate on the extent, if any, of this relationship. (n=47)

ID	Verbatim
1	I am not sure
2	Will have difficulty agreeing to one system
3	Would hope that it would be collaborative
4	None
5	I could care less.
6	Practice does not have much contact with hospitals
7	Not sure
8	Have had no hospital contact re: software.
9	They are not easy to work with on any level.
10	If we were to go that route, it would be only with major cost taken by hospital and a lot of hand
11	Hospitals have their own interest in mind
12	Not aware of this
13	Not good relationship with hospital
14	I haven't heard of any great movement towards this, so I don't expect any significant interactions
15	It would benefit both parties.
16	Will seek previous and similar experience
17	None
18	None, zip, nada. Our private practice is quite separate from the hospital in every way.
19	Outpatient practice only

**Continued...**

20	None
21	None
22	Na
23	None
24	We have no real relationship with a hospital
25	I am independent
26	None
27	Will help with evaluation of systems and possibly share cost
28	N
29	None
30	The more help, the better
31	Close work on compatibility issues
32	I know they already circulated a petition/survey to see what we are using now. I have inside knowledge of what efforts are being made
33	Na
34	Variable relationship
35	I Do Not Do Much Hospital Work
36	We are in a group practice that does a lot of hospital work. Follow up is essential
37	None
38	Our hospital has shown little enthusiasm for physician input, and have not provided any responses to our queries for features, etc.
39	I Have Had No Indication That Our Hospital Would Be Assisting Us At All
40	Committed mutual relationship on part of hospital which in reality is dictatorial with little concern for MD input
41	Would help both
42	No one from the hospital has approached me. they are in as much financial trouble as the rest of us, why would they?
43	As an ophthalmologist, work is now done in the office or an ambulatory surgical center, so there is very little involvement with the hospital.
44	No info from hospital on sharing
45	Not much interaction
46	I would actually like the IT department to help make my purchase easier as their knowledge base in this area exceeds mine.
47	None

### Questions QX

Please rate brand CMS products on each of the following attributes: - A4

n = (14-15)	Mean	% Poor (1-3)	% Average (4)	% Excellent (5-7)	Can't Evaluate
Impact on Operational Efficiency	4.5	5.6%	38.9%	38.9%	16.7%
Effectiveness in Managing Clinical Data	4.9	5.6%	22.2%	55.6%	16.7%
Ease of Use	4.7	5.6%	22.2%	55.6%	16.7%
Technical Support	4.5	5.6%	38.9%	38.9%	16.7%
Price	4.4	5.6%	38.9%	33.3%	22.2%

Please rate brand CMS products on each of the following attributes: - Allscripts

n = (23-25)	Mean	% Poor (1-3)	% Average (4)	% Excellent (5-7)	Can't Evaluate
Impact on Operational Efficiency	4.5	12.9%	22.6%	45.2%	19.4%
Effectiveness in Managing Clinical Data	5.0	0.0%	32.3%	45.2%	22.6%
Ease of Use	4.7	6.5%	29.0%	45.2%	19.4%
Technical Support	4.6	6.5%	35.5%	35.5%	22.6%
Price	4.3	9.7%	38.7%	25.8%	25.8%

Please rate brand CMS products on each of the following attributes: - Athenahealth

n = (13-15)	Mean	% Poor (1-3)	% Average (4)	% Excellent (5-7)	Can't Evaluate
<b>Impact on Operational Efficiency</b>	4.2	14.3%	28.6%	28.6%	28.6%
<b>Effectiveness in Managing Clinical Data</b>	4.7	4.8%	23.8%	42.9%	28.6%
<b>Ease of Use</b>	4.1	9.5%	33.3%	28.6%	28.6%
<b>Technical Support</b>	4.1	19.0%	23.8%	28.6%	28.6%
<b>Price</b>	4.2	9.5%	23.8%	28.6%	38.1%

Please rate brand CMS products on each of the following attributes: - Cerner

n = (15-17)	Mean	% Poor (1-3)	% Average (4)	% Excellent (5-7)	Can't Evaluate
<b>Impact on Operational Efficiency</b>	4.1	19.0%	28.6%	33.3%	19.0%
<b>Effectiveness in Managing Clinical Data</b>	4.6	4.8%	33.3%	42.9%	19.0%
<b>Ease of Use</b>	4.2	19.0%	19.0%	42.9%	19.0%
<b>Technical Support</b>	4.4	4.8%	38.1%	38.1%	19.0%
<b>Price</b>	4.1	4.8%	52.4%	14.3%	28.6%

Please rate brand CMS products on each of the following attributes: - CPSI

n = (9-10)	Mean	% Poor (1-3)	% Average (4)	% Excellent (5-7)	Can't Evaluate
<b>Impact on Operational Efficiency</b>	4.7	6.3%	6.3%	50.0%	37.5%
<b>Effectiveness in Managing Clinical Data</b>	4.9	6.3%	6.3%	50.0%	37.5%
<b>Ease of Use</b>	5.1	6.3%	6.3%	50.0%	37.5%
<b>Technical Support</b>	4.5	6.3%	31.3%	25.0%	37.5%

<b>Price</b>	4.9	0.0%	25.0%	31.3%	43.8%
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Please rate brand CMS products on each of the following attributes: - Dairyland

<b>n = (7-8)</b>	<b>Mean</b>	<b>% Poor (1-3)</b>	<b>% Average (4)</b>	<b>% Excellent (5-7)</b>	<b>Can't Evaluate</b>
<b>Impact on Operational Efficiency</b>	4.1	7.7%	30.8%	23.1%	38.5%
<b>Effectiveness in Managing Clinical Data</b>	4.6	7.7%	23.1%	30.8%	38.5%
<b>Ease of Use</b>	4.4	7.7%	15.4%	38.5%	38.5%
<b>Technical Support</b>	4.1	7.7%	30.8%	23.1%	38.5%
<b>Price</b>	4.0	15.4%	15.4%	23.1%	46.2%

Please rate brand CMS products on each of the following attributes: - eClinicalWorks

<b>n = (16-18)</b>	<b>Mean</b>	<b>% Poor (1-3)</b>	<b>% Average (4)</b>	<b>% Excellent (5-7)</b>	<b>Can't Evaluate</b>
<b>Impact on Operational Efficiency</b>	4.4	8.0%	28.0%	32.0%	32.0%
<b>Effectiveness in Managing Clinical Data</b>	4.8	8.0%	20.0%	44.0%	28.0%
<b>Ease of Use</b>	4.4	8.0%	32.0%	32.0%	28.0%
<b>Technical Support</b>	4.4	8.0%	28.0%	32.0%	32.0%
<b>Price</b>	4.1	12.0%	32.0%	20.0%	36.0%

Please rate brand CMS products on each of the following attributes: - Eclipsys

<b>n = (12-14)</b>	<b>Mean</b>	<b>% Poor (1-3)</b>	<b>% Average (4)</b>	<b>% Excellent (5-7)</b>	<b>Can't Evaluate</b>
<b>Impact on Operational Efficiency</b>	4.6	9.1%	22.7%	31.8%	36.4%
<b>Effectiveness in Managing Clinical Data</b>	4.9	4.5%	22.7%	36.4%	36.4%

<b>Ease of Use</b>	5.0	0.0%	27.3%	36.4%	36.4%
<b>Technical Support</b>	4.9	0.0%	31.8%	31.8%	36.4%
<b>Price</b>	4.6	0.0%	36.4%	18.2%	45.5%

Please rate brand CMS products on each of the following attributes: - EPIC

<b>n = (18-19)</b>	<b>Mean</b>	<b>% Poor (1-3)</b>	<b>% Average (4)</b>	<b>% Excellent (5-7)</b>	<b>Can't Evaluate</b>
<b>Impact on Operational Efficiency</b>	4.7	8.3%	29.2%	37.5%	25.0%
<b>Effectiveness in Managing Clinical Data</b>	5.0	4.2%	20.8%	50.0%	25.0%
<b>Ease of Use</b>	4.7	8.3%	20.8%	50.0%	20.8%
<b>Technical Support</b>	4.8	4.2%	25.0%	45.8%	25.0%
<b>Price</b>	4.1	20.8%	25.0%	29.2%	25.0%

Please rate brand CMS products on each of the following attributes: - GE/IDX

<b>n = (13-16)</b>	<b>Mean</b>	<b>% Poor (1-3)</b>	<b>% Average (4)</b>	<b>% Excellent (5-7)</b>	<b>Can't Evaluate</b>
<b>Impact on Operational Efficiency</b>	4.3	14.3%	19.0%	38.1%	28.6%
<b>Effectiveness in Managing Clinical Data</b>	4.7	9.5%	23.8%	38.1%	28.6%
<b>Ease of Use</b>	4.1	19.0%	23.8%	33.3%	23.8%
<b>Technical Support</b>	4.3	9.5%	23.8%	33.3%	33.3%
<b>Price</b>	3.9	14.3%	28.6%	19.0%	38.1%

Please rate brand CMS products on each of the following attributes: - McKesson

<b>n = (17-18)</b>	<b>Mean</b>	<b>% Poor (1-3)</b>	<b>% Average (4)</b>	<b>% Excellent (5-7)</b>	<b>Can't Evaluate</b>
<b>Impact on Operational Efficiency</b>	4.4	8.7%	34.8%	34.8%	21.7%

<b>Effectiveness in Managing Clinical Data</b>	4.3	13.0%	26.1%	39.1%	21.7%
<b>Ease of Use</b>	4.5	13.0%	26.1%	39.1%	21.7%
<b>Technical Support</b>	4.5	8.7%	30.4%	39.1%	21.7%
<b>Price</b>	4.3	17.4%	17.4%	39.1%	26.1%

Please rate brand CMS products on each of the following attributes: - Misys

n = (11-12)	Mean	% Poor (1-3)	% Average (4)	% Excellent (5-7)	Can't Evaluate
<b>Impact on Operational Efficiency</b>	4.3	5.0%	30.0%	25.0%	40.0%
<b>Effectiveness in Managing Clinical Data</b>	4.3	15.0%	15.0%	30.0%	40.0%
<b>Ease of Use</b>	4.5	15.0%	15.0%	30.0%	40.0%
<b>Technical Support</b>	4.0	15.0%	25.0%	20.0%	40.0%
<b>Price</b>	3.8	20.0%	15.0%	20.0%	45.0%

Please rate brand CMS products on each of the following attributes: - NextGen

n = (14-16)	Mean	% Poor (1-3)	% Average (4)	% Excellent (5-7)	Can't Evaluate
<b>Impact on Operational Efficiency</b>	4.9	8.3%	12.5%	41.7%	37.5%
<b>Effectiveness in Managing Clinical Data</b>	4.9	4.2%	16.7%	41.7%	37.5%
<b>Ease of Use</b>	4.9	8.3%	20.8%	37.5%	33.3%
<b>Technical Support</b>	4.8	4.2%	25.0%	29.2%	41.7%
<b>Price</b>	4.0	20.8%	16.7%	25.0%	37.5%

Please rate brand CMS products on each of the following attributes: - Sage

n = (9-10)	Mean	% Poor (1-3)	% Average (4)	% Excellent (5-7)	Can't Evaluate
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<b>Impact on Operational Efficiency</b>	4.1	11.1%	16.7%	27.8%	44.4%
<b>Effectiveness in Managing Clinical Data</b>	4.1	11.1%	22.2%	22.2%	44.4%
<b>Ease of Use</b>	4.0	5.6%	33.3%	16.7%	44.4%
<b>Technical Support</b>	3.9	16.7%	16.7%	22.2%	44.4%
<b>Price</b>	4.0	5.6%	33.3%	11.1%	50.0%

Please rate brand CMS products on each of the following attributes: - Siemens

<b>n = (14-15)</b>	<b>Mean</b>	<b>% Poor (1-3)</b>	<b>% Average (4)</b>	<b>% Excellent (5-7)</b>	<b>Can't Evaluate</b>
<b>Impact on Operational Efficiency</b>	4.6	15.8%	5.3%	52.6%	26.3%
<b>Effectiveness in Managing Clinical Data</b>	4.7	5.3%	26.3%	47.4%	21.1%
<b>Ease of Use</b>	4.6	15.8%	5.3%	52.6%	26.3%
<b>Technical Support</b>	4.6	5.3%	21.1%	47.4%	26.3%
<b>Price</b>	4.8	5.3%	15.8%	52.6%	26.3%

Please rate brand CMS products on each of the following attributes: - VitalWorks

<b>n = (9-10)</b>	<b>Mean</b>	<b>% Poor (1-3)</b>	<b>% Average (4)</b>	<b>% Excellent (5-7)</b>	<b>Can't Evaluate</b>
<b>Impact on Operational Efficiency</b>	4.8	12.5%	6.3%	43.8%	37.5%
<b>Effectiveness in Managing Clinical Data</b>	4.7	6.3%	18.8%	37.5%	37.5%
<b>Ease of Use</b>	4.6	12.5%	12.5%	37.5%	37.5%
<b>Technical Support</b>	4.9	6.3%	25.0%	31.3%	37.5%
<b>Price</b>	4.7	6.3%	18.8%	31.3%	43.8%