Legal EHR—Friend, Not Foe

Save to myBoK

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AHIMA has been working hard to advance the industry's understanding of the legal electronic health record and to develop practical advice for ensuring that EHRs protect patients and providers at each stage of development. While descriptive, the phrase legal EHR seems to strike fear in some who prefer to put off discussions of the requirements that electronic records must meet for legal proceedings.

For some reason, there is a reluctance to acknowledge that malpractice suits, fraud, identify theft, and other unfortunate realities of our litigious healthcare environment can be aided or compromised by the quality of the record. When we should be moving forward with robust research and development on these topics, we seem instead to be withdrawing ostrich-like to leave these issues for a future time.

We have begun to identify ways to ensure an organization's EHR meets legal and business requirements. We also have learned a lot about how well-designed EHRs can aid fraud management.

Organizations are making significant investments in building IT infrastructure. The value of EHRs for patient care cannot be overstated; however, we must also look at their capability as an accurate, complete, and auditable business record. This won't happen automatically for electronic records any more than it has for paper.

Planning and Risk Assessment

Health Level Seven has balloted a new standard, the EHR System Records Management and Evidentiary Support Functional Profile, which Michelle Dougherty describes in "How Legal Is Your EHR?" The draft is useful today as a tool to assess your organization's risks and the capabilities of current functionality and business practices.

Ensuring a legally defensible and protective document is a part of managing the information assets of the organization—paper and electronic. In "Enterprise Content and Records Management" Karen Strong lays out the framework within which these parameters operate. She notes that an increase in subpoenas requesting electronic records will encourage healthcare organizations to explore this emerging practice. In "Enterprise Content Management from the Ground Up" Sandra Nunn describes her organization's developing enterprise content management strategy as part of its overall information management planning.

In "Legal EHR Roundtable" experts reflect on the need to understand the various perspectives on this issue and to build a shared understanding of the need for and attributes of a legally sound EHR. Understanding differing perspectives helps raise awareness and helps everyone work together more effectively. Sound patient care, business processes, and records management are essential dimensions for a legally protective EHR.

Also in this issue, we tackle the topic of data exchange. In "Clinical Data Exchange Models" Beth Just and Stacie Durkin stress that an HIE's success will depend in part on a good match between its goals and the IT foundation it chooses. "Working without a Paper Net" introduces us to Kaye Connor who adapted HIM skills from the paper world to a new and completely paperless hospital. Wouldn't we all like to start fresh with no paper from day one?

Accelerating adoption of EHRs is an important goal. We need to take steps to ensure that records meet the needs of and protect patients and providers and those who pay the bill. We should seek to strike this balance, and we should acknowledge that we ignore or delay attention to the legal EHR at our collective peril.

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