



### **Guidance for EMR users on leaving an EMR Clinic**

This document will outline what Providers need to do from a technology and Electronic Medical Records (EMR) Program perspective when leaving a clinic where they are using EMR. This can happen in a variety of scenarios including, but not limited to:

1. Moving from one clinic to another within the Province;
2. Retiring from practice;
3. Leaving the Province;
4. Leaving a Fee-for Service (FFS) practice to move into an RHA-administered program, service or clinic; or
5. Leaving a Regional Health Authority and moving to a FFS practice and/or opening your own clinic.

There are College of Physicians and Surgeons of Newfoundland and Labrador (CPSNL) and College of Registered Nurses of Newfoundland and Labrador (CRNNL) guidelines and expectations concerning this process from professional, medicolegal, and legislative perspectives. Specific guidance should always be sought from the CPSNL, CRNNL and the Canadian Medical Protective Association (CMPA) and equivalent Nurses Protective Association as the expected standards of practice.

The EMR program (commonly referred to as eDOCSNL) is an Information Technology solution provider and has no authority over provider best practice or for any professional standards. It is expected that Providers who are retiring, moving clinics, or otherwise leaving practice would investigate their professional and legal requirements. The eDOCSNL Program can, however, offer you advice on what to do with the EMR itself.

Understandably, as you approach this transition you will have many questions as there is much to sort out in anticipation of this change. Some of the questions we will answer for you in this document are:

1. What does it mean to leave an EMR clinic?
2. How do I notify eDOCSNL that I am leaving?
3. What happens to my EMR fees?
4. What do I do with my EMR data/patient records?
5. What happens to my billing information?
6. Where do my outstanding clinical results go when I leave?
7. I have outstanding tasks in the EMR that I am transitioning away from; how do I deal with them?

8. I work with other physicians; what happens to our shared EMR when I leave?

### **What does it mean to “leave” an EMR clinic?**

“Leaving” an EMR means you cease all activity in the EMR and surrender your EMR account/license in that instance. This is not related to surrendering your license to practice, though this may occur simultaneously. If this is the situation, please refer to the document on guidance for “Retirement From EMR Practice”, which can be found [here](#).

What leaving the EMR does **not** mean is scaling back your practice, continuing to manage a select number of patients in the EMR, keeping your EMR account active for administrative or billing purposes or to continue to receive and manage eResults. Any activity within the EMR is considered as maintaining an active account/license in that EMR.

### **How do I notify the Program that I am leaving?**

If you are leaving EMR-based practice altogether, the first step is to fill out a Provider Termination Form which can be found [here](#). The Termination Form must be submitted to eDOCSNL at least **90 days** before your last day of practice at the clinic. This period is needed for the Program to make all the necessary steps to safely transition eResults, to allow for a data extract from the instance, if required, and to work with the vendor to terminate your account in the EMR. There are no exceptions to this. Providers who do not give the program 90 days’ notice will continue to be billed for 90 days from the date the Termination Form is submitted.

If you are moving from one EMR to another within the province you are required to complete a Transfer Notification Form which can be found [here](#). You will need to indicate if you would like your patient charts moved to your new instance. In this scenario, a data transfer fee will apply. Your monthly subscription fees will remain the same after the transition.

For both of these scenarios, the notice period starts with submission of this form, **not** from a phone call or email to the Program office or your Practice Advisor indicating that you are leaving the clinic.

### **What happens to my EMR fees?**

Providers continue to be responsible for paying any outstanding EMR fees. If the transition is out of EMR altogether and this happens before the end of a fiscal year for which you have already paid your fees, any excess you have paid beyond your termination date (90 days after submission of a termination form) will be refunded. Failure to pay outstanding fees could be subject to collection action, as per EMR Management Committee Policy found [here](#). eDOCSNL will work with you to make payment arrangements. If you are moving from one EMR to another, there will be no change in your monthly fees.

### **What do I do with my EMR data/patient records?**

The professional obligations expected of physicians and nurse practitioners by the CPSNL, CRNNL or under legislation do not differ depending on documentation solution. i.e., they are the same as providers who document on paper.

The CPSNL has specific by-laws and regulations on this, which can be found [here](#) and [here](#). You have options when it comes to your EMR data:

1. Have another physician assume custodianship of your records:
  - a. If this is in your existing EMR instance, the charts can stay where they are.
  - b. If this physician works in another EMR see 2b.
2. Take an extract of your EMR data in the form of:
  - a. A PDF of the patient records.
  - b. A digital extract in a format compatible with Med Access (this would only be useful if these records were moved to another EMR instance).

A review of your records and cleanup effort may be necessary in anticipation of your leaving date to make sure the appropriate charts are identified for the data extract.

If a digital extract is required in either form, a \$1500 + HST fee applies, which is paid by the physician requiring the extract. If the charts are subsequently imported into another EMR, an additional \$1500 + HST fee applies. Again, this fee is the responsibility of the physician. These fees are charged by Telus to eDOCSNL and nothing is added to this by the Program – this is a pure cost recovery exercise as the Program does not cover these fees.

There are private vendors that provide chart management services in the event that you are unable to find another custodian to assume responsibility of your charts. You may wish to investigate this option.

If you are moving from one EMR to another and taking your charts with you, you would remain the custodian of the records.

### **What happens to my billing information?**

The required 90 days' notice period provides adequate time to reconcile your transition billing requirements. For privacy reasons, it is recommended not to have billing information continue to be delivered to an EMR you no longer work in. For this reason, and because you may have no way to access that information post-transition, it is suggested that make arrangement with MCP to have all your billing-related information delivered on paper to an address of your choosing, following your retirement/leaving date. MCP information for providers can be found [here](#). MCP advises that physicians are responsible for reconciling all submissions and payments received from them on a regular basis and to be aware of anything outstanding. If there are claims about which there is any uncertainty, you should send a request to MCP for a status update on these specific items.

### **Where do my outstanding clinical results go after I leave?**

If you are leaving EMR altogether, eResults will be turned off and paper results will be turned back on, effective the date you provide to the Program on your Termination Form. As per CPSNL guidelines, it is the provider's responsibility to ensure that this is done in a way that facilitates the safe flow of patient information and that results received after leaving the EMR are managed appropriately. It is beyond the

scope of the EMR program to provide this guidance and we suggest you familiarize yourself with the CPSNL guidelines on leaving a practice found [here](#). Non-physician providers should consult with their respective regulatory bodies. A very important part of this process is the correct notification to eDOCSNL of the **exact and accurate** date of leaving the clinic. Recommendations would be as follow:

1. Submit the Termination or Transfer Form with your date of leaving the clinic;
2. If the date changes, you must let the Program know.
3. If you will not be caring for your existing patients after you transfer, you must notify your patients, as per the your regulatory body's guidelines.
4. Notify the applicable RHA(s) of your move and provide them with a forwarding address for the Meditech Provider dictionary, if this is also changing.
5. Arrange for transfer of your records, if applicable. The new custodian will now be responsible for managing incoming clinical information and your responsibility will be to ensure that any results you receive after leaving the clinic are redirected to the new custodian.
6. If you are unable to do this, then you must follow the CPSNL guidelines referenced above for the appropriate management of clinical information.

If you are moving from one EMR clinic to another, the orders from your new clinic will automatically flow to the correct (new) EMR. However, eResults for orders that are already being processed in the system may continue to be delivered to the original EMR. Depending on what is done with your account in the EMR when you leave, these results will flow to the person/role identified as the "reconcile user". It is the Provider's responsibility to ensure that the results for which you are the ordering provider reach the right destination. We would suggest you work with the clinic you are leaving on a mutually acceptable mechanism to transfer those results to either yourself or the new provider and/or custodian, while being conscious of the fact that responsibility for the proper management of this process lies with you. **Note:** if your account remains active in the EMR you are leaving then eResults will continue to be delivered to that account and may be invisible to the remainder of the providers in the clinic or to the reconcile user. When you leave an EMR clinic, your Med Access user account/profile should be **DELETED**, not **SUSPENDED**, and not remain **ACTIVE**.

#### **I have outstanding tasks in the EMR, how do I deal with them?**

It is your responsibility to clean up outstanding tasks in the EMR before you leave. A cleanup exercise for any outstanding tasks needs to be completed before your account is deleted in the EMR you are leaving, as you will no longer have access to these tasks following the specified date. The importance of this cannot be overstated: some of these tasks will undoubtedly be clinical results and should be actioned before you lose access to the EMR. If you have many tasks and if you would like assistance with efficient ways to address them, such as batching, please reach out to eDOCSNL at [info@edocnsl.ca](mailto:info@edocnsl.ca).

#### **I work with other providers, what happens to our shared EMR when I leave?**

Your leaving will have no impact on the functioning of the EMR instance. The other providers will continue to be able to work in the EMR and access the patient records as normal. Your account will be deleted (which must be done at clinic level) following the data extract (if applicable) so you will no longer have access, but the other users will be unaffected. If your associated support staff are also

leaving the practice, they should have their accounts deleted at that time as well, to align with best practice with privacy and security standards.