

Are BJC & Washington University School of Medicine (WUSM) currently using an EHR system? - Across our health care community we have a multitude of systems with little integration from site to site. For our patients, this means they may have to answer the same question multiple times. With Epic, we are moving to one system, which means no matter where a patient enters our network, they will have optimal coordination and continuity of care.

What is Epic? - Epic is an electronic health record system (EHR). With Epic, we will have a single fully integrated system across our health care organizations for managing patient care. The Epic EHR system will replace over 50 of our current systems and applications with a single medical record to track a patient throughout our health care community. While the Epic EHR is a system, it is also a monumental example of our shared commitment to provide exceptional care for our patients today and provide the platform to meet our needs in the future.

Why did BJC Washington University School of Medicine (WUSM) choose Epic? - BJC and Washington University School of Medicine (WUSM) went through a very rigorous review to select the best EHR system, and Epic most closely aligned with our needs. The selection process began in January 2014 and brought together providers, clinicians, administrators and staff from the hospitals, WUSM and BJC Medical Group to evaluate the functionality, capabilities and long-term viability of the system, and Epic was chosen as the system best meeting those needs. Epic will enable a single medical record to follow a patient throughout our health care community, allowing medical providers the ability to see patient records across all functions.

How will Epic benefit our patients? - One of the most notable benefits for our patients is having one continuous health record across all BJC and Washington University School of Medicine (WUSM), resulting in less repetition in compiling health histories. Another feature of the new system will be access to the patient portal (called MyChart). In the portal, a patient can view test results, see upcoming and past appointments, as well as schedule future appointments, email their provider, securely pay invoices, and receive automated health reminders.

How will Epic benefit our providers and clinicians? - Providers and clinicians who practice in BJC and Washington University School of Medicine (WUSM) hospitals, clinics, and practices will have easy and integrated access to patient information. This access will help provide alerts when possible conflicts arise in patient treatment as they move through the system and help with patient follow-up communication. With Epic, all of a patient's information will be easily accessible, test results can be viewed as soon as they are available, providers can easily communicate directly with other providers about a patient, and orders can be placed remotely at any time.

What is "One Patient, One Record?" - One Patient, One Record" means our patients will benefit from having their BJC and Washington University School of Medicine (WUSM) health information accessible through one easy-to-use patient portal. This allows the information to be available across the entire BJC and WUSM organizations.

How will providers access Epic when at home? - A new portal (similar to, but with much more functionality than accessbjc) is being created. Providers will access the portal via a browser, log in with their username and RSA and have access to their Citrix, VMware, RDS, etc. applications, desktops, and web links. From here, they choose the area they want to access, and once their password is entered and they can begin working. The portal is part of the collaborative VDI project BJC and Washington University School of Medicine are working on and is not active at this time.

Why do I hear different terms for Epic such as Cadence, Beacon and OpTime? - While Epic is a fully integrated system, it is made up of many specialized tools and modules for improving patient care, each with their own name. Cadence for scheduling, Beacon for oncology, OpTime for surgery are some of the more than 30 modules in Epic. In the same way you might download various

applications onto your smart phone to customize its capabilities, Epic also has an “app” (module) for everything, but unlike your phone, each of these modules are designed to integrate seamlessly with one another.

Will everyone be using the same system? - Yes. The entire health care communities of BJC and Washington University School of Medicine (WUSM) are going to a fully integrated system called Epic EHR. A single electronic health record provides the opportunity to realize the program vision to deliver world-class care and service to patients and their families.

How big is the Epic project team? - Our team consists of approximately 250 full-time employees (application specialists, instructional designers, trainers, report writers, technical support, managers and leaders) recruited by BJC and Washington University School of Medicine (WUSM). The team, with support from Epic, is partnering with physicians and other clinical and non-clinical stakeholders from across BJC and WUSM to design and build our Epic EHR system. The size of the team reflects best practices from Epic and the size of other hospital systems who implemented Epic EHR.

If I have a question about the Epic program, who can I contact? – CONTACT YOUR MANAGER OR DANA SCHULL

Where can we see demos of the new system? - Click here to view demos of the Epic electronic health records (EHR) system. These short 5-15 minute videos will provide a helpful overview of Epic EHR functionality. Roadshows are coming to many sites during Q4 2016 and Q1 2017 providing an overview of the EHR. In addition, ongoing demos will be available during the 6-9 months prior to go-live at your site. Please remember: these videos provide a helpful overview. However, the functionalities may not align exactly with the enhancements being built specifically for BJC and WUSM.

Who is running this project? - A team BJC and Washington University School of Medicine (WUSM) staff are working to implement the Epic electronic health record (EHR) system. It takes a large team with participation across the BJC and WUSM communities to complete the process. The team is led by Executive Sponsors, Program Directors, Clinical Champions, and a Provider Advisory Council.

I want to learn more about Epic. What resources are available to me? - The Epic Program Website provides access to many great resources, and will be updated on a regular basis. Epic UserWeb is also a great place to learn more about the Epic system. This resource site, maintained independently by the Epic Company, includes trainings, webcasts, visuals, and other resources to help team members learn the Epic EHR system. While we encourage you to use this site liberally, please keep in mind our roll out will be customized for BJC Washington University School of Medicine (WUSM) and some Epic system functionality may not reflect what you see on Epic UserWeb.

If implementing Epic is supposed to put us on one system, why will we still be using Soarian for charging, billing and registration? - The Soarian implementation began in 2011, and the Epic EHR system was selected in 2014. By nature of timing, these two implementations overlap with one another. BJC elected to complete the Soarian implementation at the remaining two hospitals (BJH and SLCH) in order to eliminate the legacy A/R systems (BPIN/Invision) and associated risks with support. All hospitals will be on Soarian by end of 2016 prior to the first Epic hospital implementation, and Soarian will interface with Epic during the Epic go-live. This decision will pose less risk to respective timelines and ensure the initial transition to epic will be easier for end users.

Will Soarian be replaced with an EPIC application for charging, billing and registration? - There are no plans to replace Soarian with the Epic system. Most charging will occur in EPIC and

will be passed to Soarian for billing. In an effort to create a sustainable degree of change and meet tight timelines for both system implementations, the organization will complete the Soarian implementation as originally planned, and integrate the two systems during the Epic implementation. Soarian and Epic program teams are now working to create a manageable process for feeding information between the two systems.

Is Epic considered an IT project? - While the Epic system provides the IT technology required to implement new clinical workflows, physicians, clinicians and operational teams provide guidance for developing the workflows. This is a clinically lead and IT supported project.

When will the Soarian implementation be complete? - Final preparations for the BJH Soarian implementation are well underway and are scheduled for June 3, 2016. The SLCH implementation will occur later in 2016.

What will happen if there are significant issues during one of the go-live phases? - To help mitigate the risk of significant issues, we plan to start with a pilot go-live site allowing time for issue resolution and training prior to the next go-live. We are also carefully considering input from experts regarding the best practices of our peers when developing our timeline, schedule, and go-live practices.

When can I expect Epic to be implemented? - The new Epic system will be implemented across BJC and Washington University School of Medicine (WUSM) in a series of "go-live" events starting in June 2017. While the exact details of each go-live are still in development, the sequence of go-live sites has been confirmed. We will continue to provide updates as details are finalized. Many factors were considered in the selection of this timeline - including safety, staffing levels, geographic location, and specific impacts to each facility. While there are pros and cons to any sequencing proposal, leadership is confident this is the best plan to effectively transition all of BJC and WUSM to a single integrated system.

Why will the Epic implementation take so long? - The Epic EHR implementation will impact nearly all of our operational functions across BJC and Washington University School of Medicine. Because of the risk involved in a change of this magnitude, there is a significant amount of planning and preparation necessary prior to go live. This preparation involves not only our HIP program team, but also staff from each facility for decision making and design of the system. With help from each site, we have completed the selection and design phase of the program, and are currently building out the system to meet specifications. We will complete this phase in Q3 2016 and will move to testing, and ultimately to our pre-implementation preparations with each site.