Comparison of stand-alone versus EMR systems

One of the most critical decisions to make early on is whether to implement ePrescribing as a stand-alone system or within an electronic medical record (EMR) system. There are considerable differences between the two options in terms of cost, difficulty of implementation and affects on workflow. The following comparisons should help you evaluate the alternatives.

Factor	Stand-alone ePrescribing system	EMR system with ePrescribing
Cost	Relatively low	Relatively high
	Up to \$2,500 per year for licensing and support with potential additional costs for such functions as data integration and enhanced reporting	Typically from \$25,000 to \$45,000 per prescriber plus annual operating and maintenance expenses from 12 to 20 percent of initial costs
Difficulty of implementation	Relatively low	Relatively high
	Fewer processes affected	Affects all processes, including billing
	Fewer external integration points	Multiple external integration points
	Shorter overall project timelines	Project timelines can be long and labor intensive
Workflow impact	Relatively low	Relatively high
	More subtle, minimally disruptive improve- ments to current practice workflow	Significant changes to entire operation of practice, including scheduling, billing, lab ordering/receiving, recordkeeping and reporting
	Potential lack of integration with existing practice management systems	
Safety benefits to patient	Significant	Very significant
	Immediate access to patient data specific to prescribing process	Immediate access to all patient data
		Broader range of clinical decision support
Impact to productivity during and immediately after implementation	Relatively low	Relatively high
	• 1–3 months to maximize efficiency	• 9–12 months to maximize efficiency

