



Transworld Electronic Medical Record

A Quality-of-Care Improvement Service from the Hypertension Initiative

Frequently Asked Questions

❖ **What can I do in TEMR?**

TEMR is a full-service electronic medical record system and includes modules for labs, prescriptions, scheduling, patient records, and billing. You can also get pre-programmed special reports on patient treatment and health status. TEMR is also DOQ-IT compliant and can track your continuous quality improvement efforts.

❖ **What sort of computer hardware and software does TEMR require?**

TEMR is internet-based so only a standard web-browser is needed. Because TEMR is maintained on the internet, program speed is determined by the internet connection not by your computer's hard drive. For this reason we recommend you connect to the internet with a T1-line or cable.

❖ **How much does TEMR cost?**

TEMR costs \$1,000 per-workstation per-year. This includes IT support to answer questions, troubleshoot problems, and continuous program improvement to ensure TEMR meets the unique needs of your practice.

❖ **If the power goes out, can I still use TEMR?**

Yes. Your computers will need a source of back-up power (generator or battery) but internet connections are not affected by temporary power outages.

❖ **Can I access patient records from other places like from home or from another office?**

Yes. You can access your patient records from any computer that is connected to the internet as long as you have appropriate clearances and passwords.

❖ **Is TEMR compliant with HIPAA?**

Yes. The Business Associate (BA) agreement you signed with the Hypertension Initiative was developed with extensive input from federal HIPAA oversight officers, the Medical University of South Carolina's Investigational Review Board (IRB) and legal counsel. Because TEMR is a tool to improve quality-of-care, it falls under Treatment, Payment, and Operations (TPO) sections of the HIPAA regulations.

❖ **What about information in the old paper records?**

All practices moving from paper to electronic medical records face this challenge. Most physicians find it is sufficient to create a short summary for each patient prior to the first visit using TEMR. Occasionally, you will have to consult old records but this will happen less and less as patients build a history of recent visits in TEMR.