

# **Connected for Health**

These Critical Factors Will Enable Your Data-Sharing Strategy to Improve Outcomes for Both Patients and Providers



Healthcare is in a new age of information sharing—because technology can now enable it, because patients expect it, and because federal law now requires it. And most importantly, because it's what can empower providers to deliver more efficient care with stronger outcomes. But the path forward isn't a well-traveled highway, and the trek presents challenges along the way.

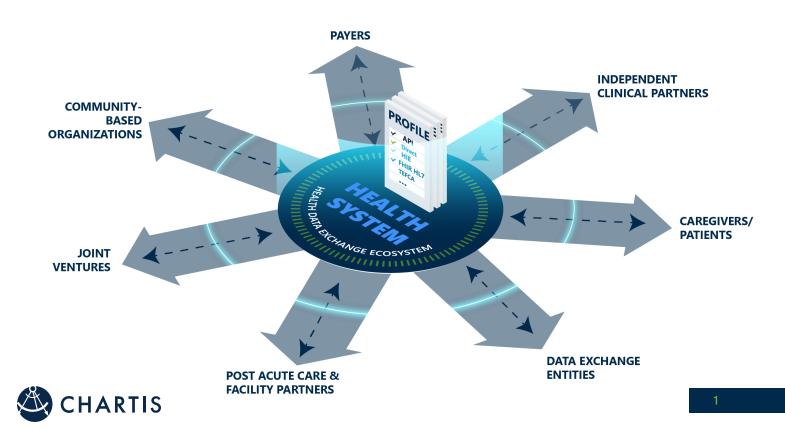


What is the best way to move forward from siloed housing of patient data to openly sharing accurate information across technology platforms? And what care partner relationships are required to successfully exchange that data? Hospitals and health systems need a holistic strategy for sharing patient and care partner data. We call this new approach "connected for health."

# The Importance of Data Sharing Has Been Clear for Some Time—and It's Becoming Increasingly Critical to Get It Right

Care partners that need to be part of hospitals and health systems' holistic strategy for sharing patient and care partner data include referring providers, health information exchanges (HIEs), payers, post-acute care professionals, and others, as depicted in Figure 1 below. Exchanging data in a meaningful way is essential to building effective relationships with these key care partners and achieving health system, care partner, and patient goals and outcomes.

Figure 1. Health System's Care Partner Data Exchange Ecosystem



## These 5 Key Components for Getting Data Sharing Right Can Enable Optimal Outcomes

## Key Components

## Outcomes



Ensure the **right information** is shared.
This includes results,
hospital admission
notifications, and referrals.

**Reduce frustration and dissatisfaction** among care partners, improve the patient experience, and avoid medical mistakes.



Ensure the **right provider** receives the information. This includes the PCP or other primary practitioners on the care team.

**Avoid delays and staff time wasted** on manual searching for or rerouting of data and increase time spent with the patient. Improve the patient experience by avoiding redundant care assessments.



Ensure that the **right patient** is associated with the correct care partner relationship.

**Reduce care team member inaccuracies** (the driver for much of the EHR data sharing) and improve compliance with information-sharing requirements.



Ensure that the information arrives at the **right time**.

Accelerate time to diagnosis and treatment. Allow the provider to make the most informed healthcare decisions, which will improve health outcomes and patient satisfaction.



Ensure the **right channel** is used for optimal information transfer.

**Decrease staff time** spent sifting through data received multiple ways and **avoid the resulting dissatisfaction.** 

# Leveraging the Technology for Meaningful Value Requires Enhanced Accountability and Processes

We are finally at a place as an industry where we can leverage informatics and technology to improve nearly every major healthcare challenge—including costs, provider satisfaction, patient experience, and outcomes. But it has to be done right.

While the <u>21st Century Cures Act</u> has brought data exchange into focus for all healthcare organizations, simply exchanging data between an individual practice and a hospital, for example, is not enough. The data exchanged must be shared effectively—without duplication and in the manner of preference—to enhance the care partner relationship and support optimal delivery of care.



The available technology is capable of the level of data exchange necessary to dramatically improve access to care information and decision-making. But most healthcare organizations and their care partners are not taking advantage of this technology or addressing the necessary accountability and enhanced operational data quality processes required to achieve meaningful value.

## The Challenges Aren't New, but the Circumstances Are Now Aligned to Overcome Them

Recent focus on addressing 21st Century Cures Act compliance has shed light on existing challenges, including:

- **Dissatisfaction:** Frustration among care partners and healthcare organizations is intensifying as they fail to receive the data necessary to care for the patient in a timely fashion.
- **Overstaffing:** Organizations have to rely on increased staffing to find data at a time when they are all coping with significant staffing shortages.
- **Sub-optimally utilized technology:** A plethora of tools exist to find data, but there is no silver-bullet tool or standardized processes that align with the tools to support effective data exchange.

Satisfaction, staffing, and technology problems are not new, and many healthcare organizations have tried to fix data exchange with their care partners and failed. So, why focus on data exchange now?

- Consumers are demanding access to more electronic health information, with most patients placing the blame for lack of information exchange on providers (including external care partners, credentialed affiliated providers, and employed providers).
- Care partners are being forced to enhance data sharing practices to be compliant with regulatory mandates.
- Data exchange technology has advanced in recent years to support these efforts.

# **Checklist for a Successful Connected for Health Program**

Getting data sharing right goes well beyond simply following regulatory requirements. Building a program that is truly connected for health requires a holistic strategy that considers the needs of both the organization and its care partners. While the technology is important, success weighs just as heavily on the care partner relationship and the people and process components.

of consumers revealed they would consider changing their physician or hospital providers in the coming year if they learned that their health record was not shareable, was not available, or was blocked in the past year.



Use the following checklist to ensure you have the critical success factors for a holistic strategy that enables optimal outcomes and savings for your patients, clinicians, care partners, and organization:



## DETERMINE THE CURRENT STATE OF YOUR CARE PARTNER ECOSYSTEM, CHANNELS, DATA, AND TOOLS

- **Define the key care partner ecosystem:** Identify and prioritize the care partner relationships that should be enhanced to support your strategic objectives. Consider not only external physician groups but also HIEs, postacute care, and community-based organizations.
  - Inventory your data channels: Determine how the identified care partners prefer to receive data and what capabilities exist in their platforms for receiving data. Channels include EHR capabilities, data access tools, and other third-party vendor platforms. With the ONC December 2022 Application Programming Interface (API) mandate, more platforms and applications that can exchange data will be developed to meet current and future demands.
- ldentify data requirements: Determine what clinical data is needed for each recipient. For example, specialties need referral data, and post-acute care facilities need Admit, Discharge, and Transfer notifications, as mandated by the 21st Century Cures Act.



CREATE THE FUTURE STATE DESIGN AND ROADMAP, FOCUSING ON THE FUNDAMENTALS OF COMMUNICATION, CHANGE MANAGEMENT, AND GOVERNANCE

- Establish an effective governance structure: Establish the governance necessary to drive decisions efficiently and effectively for the connected for health data program. Governance should comprise 3 critical groups: data governance, technical, and operations. Collaboration is key to success as the technical group informs the operations group about options, and they in turn can make recommendations to the data governance group for care partner data standardization, metrics thresholds, data synchronization processes, and other issues and opportunities for approval.
- **Design data quality processes:** Map out processes within your organization to target poor data exchange situations for remediation and proactively implement new, standardized quality data exchange processes. For example, when primary care providers are not updated in the source system with retirement dates, the patient's data is routed erroneously.



- Develop and execute connected for health strategies and the corresponding roadmap: Based on an assessment of the care partners, channels, data requirements, tools, and processes identified above, create strategies and a roadmap focusing on sharing specific data with care partners by way of their preferred channel(s).
- Determine your communication and change management approach:

  Develop a comprehensive communication and change management plan that supports your organization and providers through adopting these changes. This plan should articulate a clear vision, standards for ensuring awareness, and measurement of an understanding among key stakeholders and identified audiences.



## DEMONSTRATE VALUE THROUGH MEASUREMENT

ldentify key performance indicators: Derive a baseline for each care partner cohort. Exhibit value by improving these metrics after data exchange enhancements are implemented across people, processes, and technologies. Below are key areas where we have seen healthcare organizations achieve meaningful value, including recent measurable results.

#### **Recent Connected for Health Initiative Results**

A healthcare organization and care partners strategically improved data exchange with a pilot care partner group and achieved the following early results:

30%

in care partner data exchange satisfaction when data was shared directly in the EHR instead of via fax. Provider time with the patient increased because of reduced time spent searching for data. THE PILOT CARE
PARTNER GROUP
INCREASED ANNUAL
eREFERRALS BY

2,000



eReferrals replaced outgoing fax and reduced the physician-to-physician information transfer time from several days to 2 minutes, enabling stronger patient outcomes.

\$6,000

ESTIMATED PER PHYSICIAN ANNUAL SAVINGS IN MEDICAL RECORDS STAFF COSTS

This savings resulted from the healthcare organization increasing the number of lab results, radiology results, and consult and discharge summaries shared electronically with the care partner instead of via fax, reducing the need to search for data.

30%

in Direct Trust directory accuracy. Directory accuracy is necessary for CMS Interoperability incentives and best-practice data exchange.





## MONITOR, MAINTAIN, AND SUPPORT CHANGES TO THE PROGRAM



**Ensure ongoing ownership, accountability, and discipline for operational processes:** Develop an ongoing support plan to ensure that technologies are properly applied, and data exchange and data management standards are adhered to. Also, monitor communication, adoption, and training as new methods for the data exchange program are identified.



## **Thinking Strategically Now Means Greater Success Later**

To meet tomorrow's standard of patient care, healthcare organizations and their care partners have to get data sharing right. And right now, they are uniquely positioned to do so. Investing in being connected for health has the power to improve access to care and outcomes, increase productivity, reduce costs and errors, and enhance experience by sharing critical health data within and between care partners. By bringing together patient information from trusted care partner sources, healthcare providers and patients will have greater visibility of accurate information—and that leads to better decisions, which in turn leads to better outcomes.







### **SOURCES**

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