

Choice Matters

Do you ever notice that some people in our healthcare world always feel that not much can be done to improve our fragmented healthcare environment? There are people who view the world as 'glass half empty' or believe that 'what we have is good enough and we do not need to change'. Well you are not alone – in every organization there are naysayers constantly criticizing a new idea or an 'out-of-box' approach that threatens their 'comfort zone'.

The good news is that things have been changing fast in the healthcare industry and some of these naysayers are beginning to take notice. Pace of innovation in healthcare has picked up not only on the medicine side but also in applying workflow based information technology to create high-tech productivity and quality transformation. Quietly, small and medium size IT companies are introducing bolt-on solutions that connect doctors, hospitals and treatment centers so that clinicians can make fact paced decisions using easy-to-use software. Also, paper in medical records and other areas is getting slowly digitized and made available for immediate decision making. Test results are being pushed to cell

phone and other PDA devices to eliminate the care-gap enhancing the care process.

Smart organizations recognize that all good things begin with a group of organize thinkers who value 'critical thinking' over 'emotional thinking'. They understand that organization transformation can only happen when old ideas are replaced by new ideas, and where new ideas lead to new behavior.

We are on the verge of a healthcare revolution in terms of cost, quality of care, and customer service. The government with its swelling ranks of baby boomers cannot afford to continue to pay as they have done in the past. The rules of the game are changing fast. The naysayers sit and complain about how the government is cutting this and cutting that. What they do not understand is that if we do not change the way we provide care, we are going to bankrupt CMS (U.S. Medicare), which the government will not allow.

If we do not drastically improve provider productivity and quality of care, we will kill one of the best healthcare systems in the world. Sure



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there is room for debate to my above statement, but this debate is about to change because we have no choice but to improve our healthcare system and make it better or go bankrupt.

Changes are coming and there are many positive ways to respond to the changes. The question is: is your organization asking the right questions? In times of stress, some organizations know the right questions to frame and ask, and others keep asking the same old questions. If you do not ask the right questions, you never get the right answers which lead to the right results.

So what are some of the positive ways to respond?

- Care givers need better software which take a lot of data & document from different systems and synthesize the data into a cohesive 'patient story' for high quality clinical decision support
- Consumers need access to software that allows them to request for appointments, coordinate referrals, request refills, treatments and follow-ups and make payment seamlessly.
- Management & Key Stakeholders need near real-time performance improvement tools that will allow them to manage objectives and performance metrics across the enterprise.
- Users & Managers need 'agile' software that leverage existing IT infrastructure and provides intuitive and easy to use software to inform, track, monitor, organize and improve operational productivity, care process and cash flow in a transformational manner.

Healthcare today is a 2.2 trillion dollars a year industry – an industry that eats up 15.3% of the U.S. GDP. We have a choice. We can remain as a part of the problem or we can choose to be part of the solution. What choice will be you making for your organization today?

Kam Shams founded The Shams Group (TSG) in 1989 as a consulting and software solutions company with the vision to help hospitals capitalize on the power of information technology. He frequently coaches hospitals on best how to leverage their MEDITECH investment.



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Black Magic – Part I

Old black magic has me in its spell, that old black magic that you weave so well.
Those icy fingers up and down my spine
That same old witchcraft when your eyes meet mine.
The same old tingle that I feel inside, and then that elevator starts its ride
And down and down I go, round and round I go, like a leaf that's caught in the tide.

This Frank Sinatra song reminds me of the spells hospitals find themselves in as they look to overcome emerging healthcare challenges. This 'black magic' which might have worked for them in the past, has over time weaved a terrible web as hospitals attempt to move forward. Some hospitals have recognized this emotional attachment to the past and are taking charge of their own destiny to better position themselves for the future. Others simply are still in the grip of its icy fingers.

So what is this 'black magic' that hospital finds themselves in? What is it that makes them go down and down, round and round, like a leaf that is caught in a tide?

Different organizations from time to time find themselves in various 'black magic' spells. Today, I would like to focus on a particular type of 'black magic' where hospitals end up not being able to run their organization based on real-time facts. They rely on making decisions based on stale and outdated reports. They are unable to get access to metrics quickly and in the format where decision can be made in real-time. This 'black magic' has also unknowingly perpetuated a culture that tolerates lack of accountability and transparency.

Because of lack of access to timely performance data here are some statistics that you should take notice to:

- Healthcare is a 2.2 trillion dollar industry and is projected to reach 4 trillion. If we continue this trend without major structural improvement, we will bankrupt our healthcare system.
- Healthcare files 1.5 trillion claims a year and 30% of claims have errors
- Deaths from medical errors account for 100,000 deaths per year
- In the next ten years, we will have shortage of 96,000 primary care physicians, one million nurses, 36,000 geriatricians, and 157,000 pharmacists.

These statistics are forcing every payer organization from the government to the commercial sector to act by demanding more data and changes in how we practice healthcare. They are also conducting more audits, requiring more pre-certification or denying payment due to failure to provide what they call optimum care. It is estimated that 25-30% of \$2.2 trillion that we spend on care goes wasted in the

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needs to move away from writing reports and become a conduit to providing access to data and smart tools. IT needs to upgrade its skill sets so that it becomes aware of these new smart solutions and its impact on their hospital bottom line and performance. I believe that progressive IT managers recognize that business intelligence is a key foundational technology for hospital survival and ultimate success. They also recognize that by asking the right questions and partnering with successful vendors who understand business intelligence, they will get proven results. They now know how to avoid the failures of the past where their solution just sat in the box and never got used.

So as you go home tonight ask yourself, is your hospital 'going down and down and round and round' as it tries to improve its financial and clinical performance or do your managers and key stakeholders have access to all the information they need, in the format they need, using the tools that is as easy as point & click and web based, so it is only a URL away.

Kam Shams is Founder of The Shams Group (TSG), and past president of MUSE. TSG offers software solutions for Data Warehousing/Decision Support Systems, Document Imaging, EMPI, Physicians Portal, and EHR/CPR based business intelligence solutions for MEDITECH hospitals. Today, The Shams Group is one of the premier vendors in the MEDITECH marketplace, providing 'open' system, web-based, and integrated solutions for progressive hospitals to leverage their IT investment, and enhance revenue cycle, patient safety, data quality, enterprise-wide integration, and business intelligence.

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BroMenn Healthcare System Facility Profile

The BroMenn Healthcare System, headquartered in Bloomington-Normal, Illinois, has been serving and caring for the people of central Illinois for more than 110 years. With more than 2,000 employees working in six different communities, the BroMenn System opens doors to healing and discovery, while simultaneously offering the warm touch of professional caregivers who form the BroMenn family.

The BroMenn System is comprised of BroMenn Regional Medical Center, a 225-bed hospital renowned for its neuro, cardiac, orthopedic and women's services; Eureka Community Hospital, a 25-bed Critical Access Hospital that brings top-quality healthcare to a rural portion of central Illinois; BroMenn Physicians Management Corporation, comprised of 11 medical practices with specialties ranging from primary care and occupational medicine to cardiology, neurology and behavioral health; and the BroMenn Provider Network, a Physician Hospital Organization (PHO). From an education standpoint, BroMenn offers residencies in Neurosurgery, Family Practice and Clinical Pastoral Education. BroMenn also has several active partnerships with other organizations, including a cancer center, an Advanced MRI site, a sleep disorders center, an addiction recovery unit, an assisted living facility and a school of Radiography.

BroMenn Healthcare became MEDITECH's Scanning & Archiving beta site in 2005. BroMenn went live with Point of Contact scanning in December 2005 and went live with back end medical records scanning on December 14th, 2006. BroMenn's legal medical record has been electronic since that date. BroMenn overcame many obstacles on their way to an electronic record and continues to make process improvements in HIM today. Overall, BroMenn's journey to Scanning & Archiving and an electronic medical record has been a successful one.