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Will Tomorrow Ever Come?

Leveraging application management to focus health system IT staff on tomorrow's strategic priorities

Introduction

Health systems operate in a highly competitive market that is undergoing constant change due to the Affordable Care Act and other payment reforms. Changes include the move to pay-for-value contracting, which mandates that health systems must demonstrate and optimize the value of the care they deliver. Hospitals must demonstrate quality through reports and dashboards for external benchmarking and internal quality improvement. At the same time, IT departments must ensure the satisfaction of their internal customers – the healthcare providers who use the information systems to optimize patient care. It is these constant demands on IT department time and resources that force organizations to delay optimization projects until "tomorrow."

Demands on healthcare providers' Electronic Health Record (EHR) teams – including implementation, optimization, maintenance, performance improvement and quality initiatives – continue to grow. A focus group at a recent College of Healthcare Information Management Executives (CHIME) meeting found that the number one concern among health system Chief Information Officers (CIOs) was how to continue supporting all ongoing applications¹.

Partnering for Application Management

It can be a challenge to benefit from all the capabilities of a new EHR system while keeping up with user needs and ongoing updates and upgrades. Working with a partner can help health systems maintain reliable and high-quality applications and capabilities during system optimization efforts. This approach also frees up the health system's internal IT staff to do the most important and strategic work, helping with retention and focusing the best internal staff on mission-critical strategic optimization projects. Leveraging additional resources to maintain the current suite of applications reduces the risk that "tomorrow never comes." Working with an application management partner can help health systems maintain reliable and high-quality applications and capabilities during system optimization efforts.

Typical Health System Needs

Health system needs that can be met using Application Management include:

- *Remote support for utilizing EHR-related products, including general support questions and resolution*
- EHR personalization support relative to preference list updates and general support requests
- Provider master file maintenance and coordination
- Security-related activities, including password resets, new user creation, project-based security and user deactivation
- Patient portal activities including management of toll-free number, e-mail, bilingual services and customer-centric support
- *Regular system update assistance with testing, communication and general change management*
- EHR report development and data management expertise
- File management and uploads such as CPT uploads, medication file updates and other third-party file uploads
- Update release of information reports that case managers send to skilled nursing and rehab facilities for patient placement and insurance authorization for payment
- Queue management including monitoring of charging work queues, registration errors, orders and results, generic coverage cleanup, eligibility load errors, electronic data interchange and identity errors, and accounts payable claim pools
- Respond to service tickets and e-mail requests

Application management can optimize the total cost of ownership (TCO) of EHR support functions. Advantages of this approach include:

- Improvement in implementation outcomes
- Reduction in time and investment
- Engagement of the best internal talent where it is most needed
- Minimization of typical consulting overhead costs
- Maximization of limited health system physical workspace
- Reduction of time and management focus on existing applications.





Application Management Service (AMS) Success Phase 1: Establish AMS Scope & Expectations

An important first step in any partnership is to create and manage appropriate action plans to help ensure:

- Comprehensive application support coverage, enabling the health system's internal team members to focus their attention on EHR-related projects, upgrades and strategic initiatives
- Rapid issue response, follow-up and resolution for application break-fix, maintenance and service requests
- High application availability and performance
- Consistently high levels of end-user satisfaction as measured by Service Level Agreements (SLAs)
- A flexible level of support services, giving the health system the ability to easily increase or decrease support levels.

The AMS partner's team can be responsible for in-scope applications, ensuring that issues are addressed in a rapid and comprehensive manner. A best practice is to establish a baseline of support covering break-fix and routine maintenance, based on mutually agreed upon SLAs, on a fixed fee basis, with the ability to flex support based on the health system's changing needs.

Goals for Application Management Services

Application Management Services (AMS) primarily focus on:

- Providing comprehensive application support services to ensure a high performing, high-quality environment for end-users
- Troubleshooting initial issues for identified applications as reported through the help desk issue tracking system
- Managing and solving all break-fix, maintenance and support issues for supported applications
- Working directly with any vendor for inquiries and follow-up
- Coordinating both planned and unplanned downtime activities and management
- Providing support for mission-critical applications and reports.

AMS Success Phase 2: Transfer Knowledge and Prepare for Handover

A thorough method for transferring knowledge and preparing for handover is essential, including:

Knowledge Transfer: This phase focuses on preparing the operating partner to fully support the in-scope applications. This phase is a joint effort with the health system's support resources to perform detailed review and knowledge transfer on the applications, from the basic build review to introductions to the operational customers the team will support. Key activities are:



- Partnering/shadowing 1:1 with current application support owner(s)
- Training on the hospital's incident management system
- Establishing secure access to systems
- Validating the external partner's role and providing vendor introductions where needed
- Providing an introduction to departmental operational contacts for the supported applications
- Creating an application support guide, leveraging any existing documentation and ensuring that all documentation and processes are included.

The actual transfer of application management and support responsibilities is gradual and is divided into two distinct steps: shadowing and active learning. Each step enables the external partner's team to assume a larger role in the management and day-to-day operations, processes and procedures. This gradual transition helps ensure a seamless and complete transfer of responsibility from the hospital's staff to the partner.

> The gradual transfer of application management and support responsibilities is divided into two distinct steps: shadowing and active learning.

The first step, *shadowing*, occurs during the initial knowledge transfer period, when the partner's team members observe and shadow the hospital's support resource experienced with the application. Each partner team member should observe and document the hospital's processes, procedures and actions. The application information gathered ensures the availability of the minimum level of documentation required for signoff.

The second step, *active learning*, enables the partner's team members to assume an active role in maintenance activities. During this period, health system support team members act in an advisory capacity, while the partner's team assumes additional management and support duties. The partner is prepared to assume full maintenance responsibility of an application upon completion of the knowledge transfer signoff process.

AMS Success Phase 3: Handover

The handover phase completes the final hand-off of responsibility from the health system team to the partner. At this point, the supporting documentation and statement of work is fully updated based on: in-scope applications; services and maintenance to be performed relative to the Application Portfolio; and engagement processes – governed by an agreed -to communication plan and key messages – that will be used to manage the relationship and ensure client satisfaction.

Governance and Quality Assurance

Governance and Tracking Performance

Effective partnership governance will include reporting, dashboards and service metric reporting. The hospital's incident management system is typically used for tracking and reporting application management activities and performance to ensure seamless integration into ongoing operations. Elements include:

- **Performance Tracking and Evaluation:** Work by the partner team will be tracked and reported in several categories, such as: reporting-related problems; maintenance requests to cover all work undertaken; on-call production support; and user requests, special projects and ad hoc requests.
- **Regularly Scheduled Status Reporting:** Status meetings will follow the hospital's standards and procedures. Status reports will include sections on topics such as: tasks or maintenance requests completed; maintenance requests in process; significant accomplishments; unresolved problems; planned tasks and prioritized maintenance requests; maintenance requests approved and accepted; Small Service Request (SSR) status; and project status.
- **Quarterly Management Meetings:** Leadership meetings to discuss potential changes in project scope, report on performance relative to the agreed-upon SLAs, and allow agreement on plans for the next quarter.

Quality Assurance Methodology Reduces Risks

A formal Engagement Management Methodology can be used to enable continuous improvement and quality control. There are four key phases to an effective engagement:

- *Initiation:* Here, the client relationship is formalized, a contract agreed to for the specific engagement, the delivery team oriented to the engagement, and client engagement begins.
- **Delivery:** This stage provides oversight of overall engagement health, progress on client deliverables, and reporting on internal status to the external partner's management team.
- *Verification:* At this point, partner teams gather measurable client feedback, perform internal quality reviews, review engagement components to assess and monitor engagement health, and conduct executive relationship and quality reviews.
- *Closure:* At this final stage, knowledge and deliverables are transitioned to the hospital, achievements are documented, final evaluations from the hospital are gathered, and lessons learned are discussed.

Leveraging application management services with the ability to scale up and down to accommodate projects on an as-needed basis can relieve health systems and their IT staff of the day-to-day application management tasks associated with EHR systems.

Conclusion

Partnering with an application management provider, to support ongoing EHR optimization efforts, is a cost-effective way to ensure that in Health IT, tomorrow does indeed arrive. Leveraging application management solutions with the ability to scale up and down to accommodate projects on an asneeded basis can relieve health systems and their IT staff of the day-to-day application management tasks associated with EHR systems. This approach also supports increased clinician satisfaction as all legacy applications and reporting continue without disruption.

ABOUT ENCORE, A QUINTILES COMPANY

Since 2009, Encore has helped over 90 hospitals deploy EHRs, including more than 25 on Epic platforms. We have more than 114 Epic consultants who average more than 20 years' experience. Additionally, we concentrate on only Healthcare Information Technology (HIT) and have a large number of consultants who focus on deployment planning and optimization. Our philosophy emphasizes implementing EHRs with the end in mind, specifically by helping organizations ensure that the needed reporting and analytics can be achieved. We have also helped a number of large clients optimize their reporting approaches and infrastructure to meet new government and payer requirements, such as Meaningful Use (MU) and value based quality reporting.

ABOUT THE AUTHORS

Tom Niehaus, President & COO at Encore, A Quintiles Company

Ken Roderman, Senior Director IT, Application Management at Encore, A Quintiles Company

Linda Janiszewski, Solutions Director, EHR Systems at Encore, A Quintiles Company

Brendan McNamara, *MBA, Senior Director, Payer and Provider Solutions, Quintiles*

REFERENCES

¹Quintiles focus group involving approximately 12 health system CIOs, data on file.

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