

Realizing Value from an Enterprise EHR Investment

Results from a Survey of CHIME Members

August 2015

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Introduction

Amid new, value-based payment models, greater accountability for costs and quality, and increasingly complex regulatory IT requirements, there is no shortage of external pressures facing healthcare CIOs today. However, now that most hospitals and health systems have implemented an enterprise EHR, **there is also growing internal pressure to realize value from that investment.** *Significant* money has been spent on these systems, and executives now want to see the tangible improvements in clinical and revenue cycle outcomes that were promised.

KEY SURVEY FINDINGS ABOUT OPTIMIZATION

- More than 70% of responding CHIME members agreed (36% strongly) that the top IT priority for their organization in the next 12 months is *projects that help them realize more value from their EHR investment.*
- Only 8% said they are *not* focused on EHR optimization right now.
- Almost three quarters cited “too many competing priorities” as one of the biggest challenges to getting more value out of their EHR; only 30% cited “budget concerns.”
- Almost three quarters plan to seek outside assistance from a services firm and/or their EHR vendor in addition to leveraging internal project teams.

College of Healthcare Information Management Executives (CHIME) Survey

To get a better understanding of how healthcare organizations are attempting to realize more value from their EHR, **Impact Advisors conducted an online survey on the topic of optimization.**

An email notification with a link to the survey was sent to members of [The College of Healthcare Information Management Executives](#) (CHIME), “an executive organization dedicated to serving CIOs and other senior healthcare IT leaders.” Between 5/27/15 and 7/24/15, Impact Advisors received responses from **more than 40 CHIME members.**

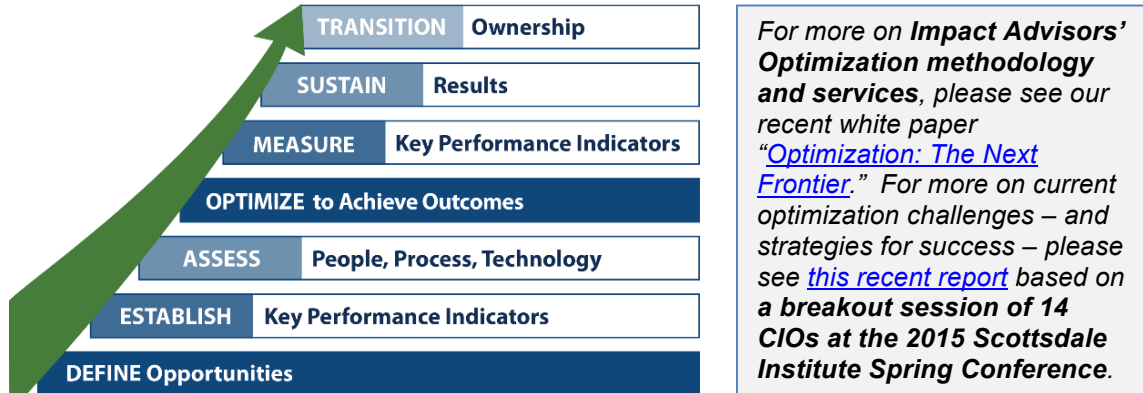
***Optimization:
Outcomes-based
improvement to meet
a defined set of
objectives.***

For the purposes of the survey (and this white paper), the term “optimization” means **significant efforts to leverage your IT investment in a programmatic way.** We defined this for CHIME members as: *Outcomes-based improvement to meet a defined set of objectives.*

Optimization – as we define it – can occur before, during, or after an EHR implementation and can be defined along an operational continuum from tactical to strategic needs. Projects can be department-specific or enterprise-wide and focus on specific improvements related to clinical and/or revenue cycle outcomes. Effective clinical and revenue cycle optimization involves a *number* of distinct steps, which begins

with first identifying problem areas and developing improvements for targeted processes, followed by actually implementing process improvements and measuring the results. [See Figure 1.]

Figure 1 – Impact Advisors’ Approach to Optimization



Survey Results

EHR Adoption and Satisfaction

Virtually all responding CHIME members indicated their organization had already implemented an enterprise EHR; half said the **implementation was completed more than two years ago**.

Responding CHIME members **expressed mild – but certainly not overwhelming – satisfaction with the improvements their organizations have realized thus far from their EHR**. For example, less than 20% strongly agreed with the statement “I am satisfied with the improvements in clinical and/or operational outcomes my organization has realized to date from our EHR investment,” while an additional two thirds only mildly agreed or “neither agreed nor disagreed.” Just under 20% also strongly agreed with the statement “I am satisfied with the revenue cycle-related improvements my organization has realized to date from our EHR investment,” with almost 60% either saying they mildly agreed or that they “neither agreed nor disagreed.”

<i>“I am satisfied with the improvements my organization has realized to date from our EHR investment”</i>					
	Strongly Agree	Agree	Neither Agree Nor Disagree	Disagree	Strongly Disagree
Clinical and/or Operational	19.1%	40.5%	26.2%	14.3%	0.0%
Revenue Cycle	19.1%	40.5%	19.1%	21.4%	0.0%

When asked specifically about quality reporting, respondents were a little more critical. Just over half agreed (but less than 17% strongly) and 26% *disagreed* (2% strongly) with the statement “I am satisfied with our EHR’s ability to date to effectively support quality initiatives and the associated reporting requirements.”

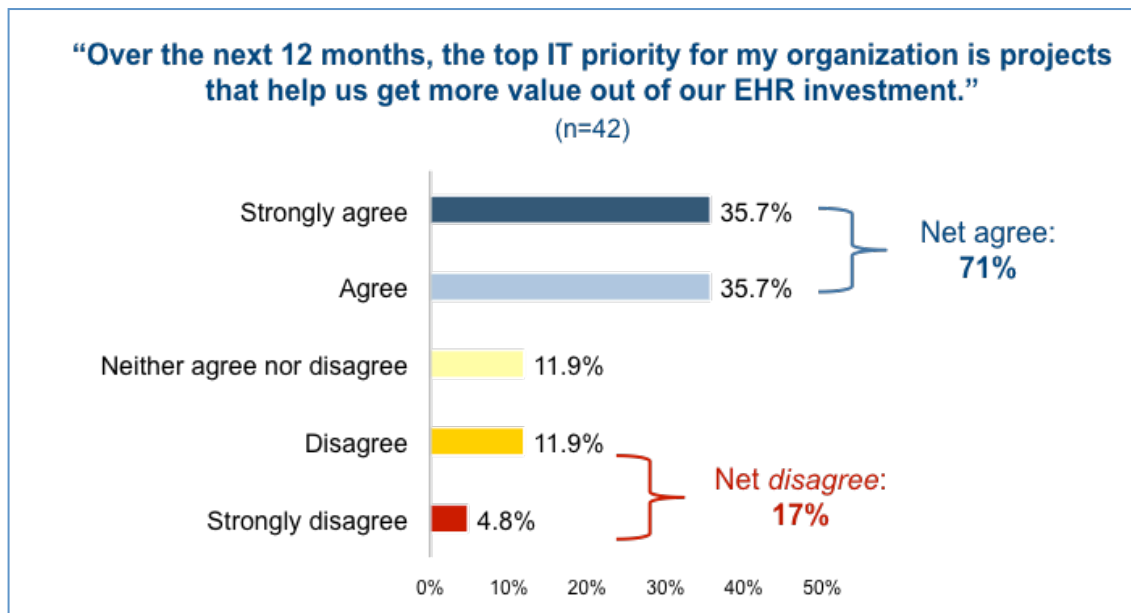
Overall, 35% of CHIME members said their EHR has *helped* their organization achieve productivity and efficiency goals, while 16% said their EHR has *hindered* it. However, there is clearly more optimization work that needs to be done, as the most common response – cited by 41% of respondents – was that **the investment in an enterprise EHR has *neither helped nor hindered* the realization of productivity and efficiency goals.**

Over 56% of respondents said that investing in an EHR has not helped their organization realize productivity and efficiency goals; and an additional 8% said they didn't know because it is too difficult to isolate the EHR's impact.

Priorities and Current Efforts

Over 70% of respondents agreed (with more than 35% strongly agreeing) that the top IT priority for their organization right now is projects that help them realize more value out of their EHR investment. [See Figure 2.]

Figure 2 – Optimization as an IT Priority

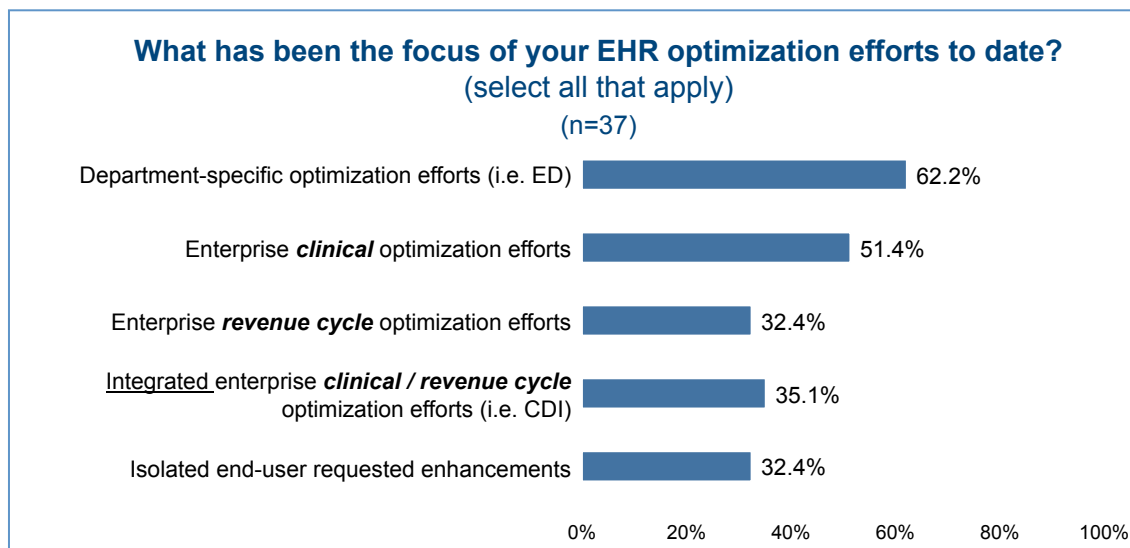


The top two *clinical* optimization priorities cited were “improve the quality of care” (mentioned by 84% of respondents) and “improve caregiver productivity” (mentioned by almost 60%). The most frequently cited *revenue cycle* optimization priorities were to “streamline key patient access functions” (58%) and “increase cash collections” (47%).

“What are the top optimization priorities for your organization over the next year?” (Select your top two.)			
Clinical Outcomes (n=37)		Revenue Cycle Outcomes (n=36)	
Improve the quality of care	83.8%	Streamline key patient access functions	58.3%
Improve caregiver productivity	59.5%	Increase cash collections	47.2%
Improve patient safety support	27.0%	Decrease aging accounts	30.6%
Increase patient satisfaction	18.9%	Decrease cost to collect	25.0%
Improve patient throughput	2.7%	Earn government incentives	25.0%

Responding CHIME members were **largely focused on operational or clinical outcome improvements**. More than 60% said they have already been involved with department-specific optimization efforts, such as process improvements in the ED, while just over half said they have taken on enterprise *clinical* optimization projects. [See Figure 3.] **Most respondents were not just focused on one type of optimization though**; almost 60% of CHIME members cited *more than one* area of focus from the options in Figure 3; close to one-third cited *more than two* of the choices listed.

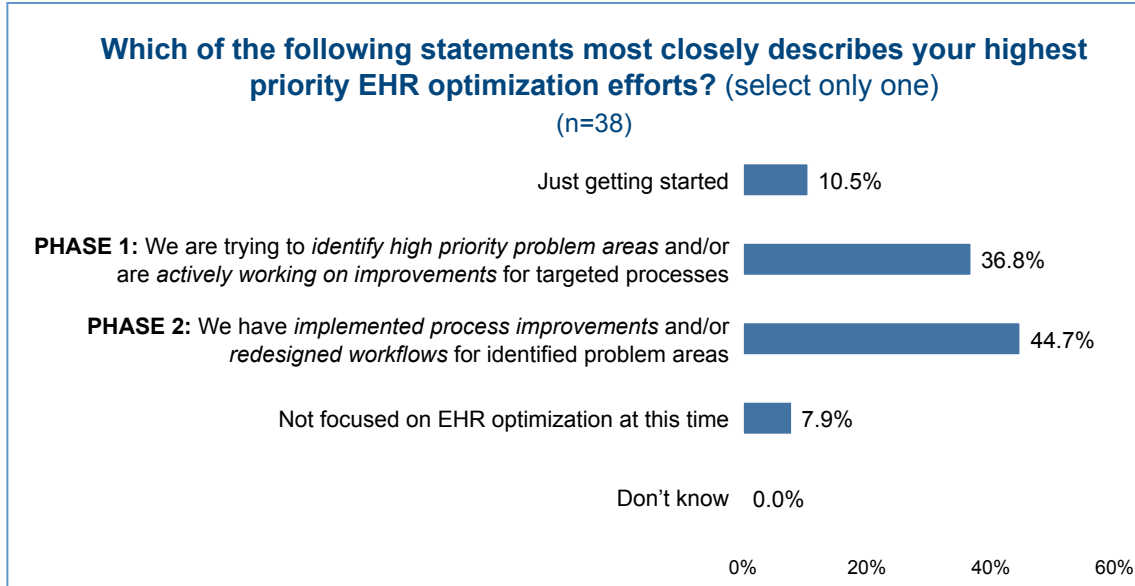
Figure 3 – Focus of EHR Optimization Efforts



When asked about the status of their **highest priority optimization efforts**, more than 80% of respondents indicated projects were currently underway. In fact, almost 45% said their organization had *already implemented* process improvements or redesigned

workflows for those highest priority efforts. Remarkably, **only 8% of CHIME members responded that their organization is *not* focused on EHR optimization** at this time. [See Figure 4.]

Figure 4 – Status of Highest Priority EHR Optimization Efforts

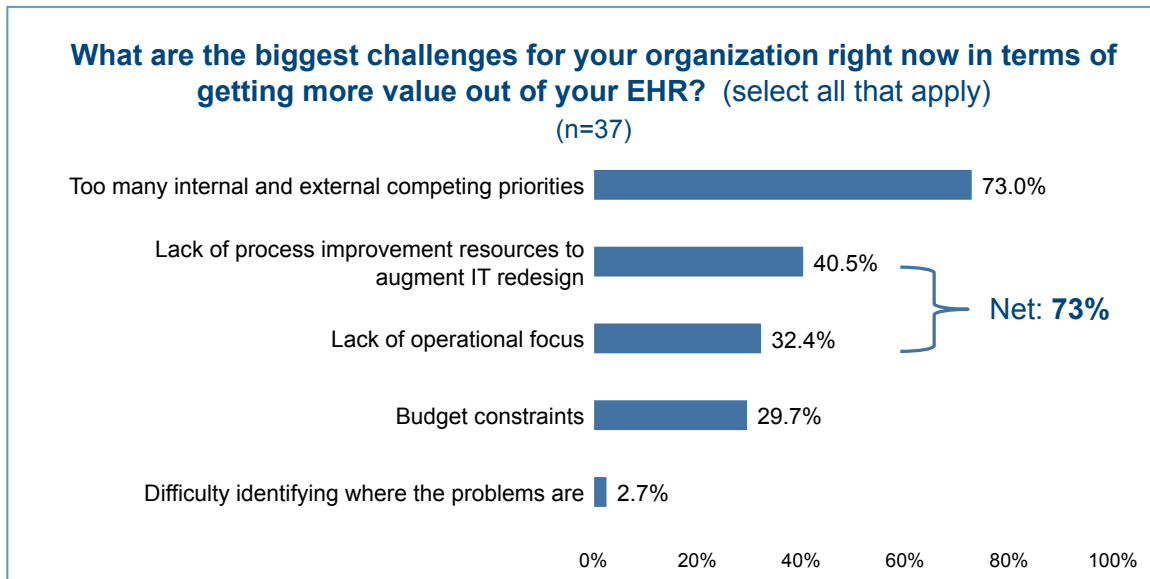


Optimization Challenges and Approaches Moving Forward

Not surprisingly, CHIME members cited a number of challenges to realizing more value from their EHR investment. **Almost three-quarters said there are too many other competing priorities.** The results also appear to suggest respondents feel **more operational ownership needs to occur in order for optimization to be successful**, as 73% cited either “lack of process improvement resources to augment IT redesign” or a “lack of operational focus” as a challenge. Interestingly, “budget constraints” was only mentioned by 30% of CHIME members as a barrier to getting more value out of the EHR. [See Figure 5.]

Optimization can occur before, during, or after an EHR implementation. However, almost 60% of respondents who were furthest along with optimization efforts (those who said their organization had already implemented process improvements) also indicated their organization completed their EHR implementation more than two years ago.

Figure 5 – Challenges



When asked which business units have most successfully leveraged the EHR investment in partnership with IT, the least common responses were *clinically-related*: “quality” (mentioned by only 26% of CHIME members) and “medical group” (29%). The most frequent business unit mentioned was “finance / revenue cycle,” cited by half of respondents.

Perhaps underscoring the many challenges providers are facing in order to get more value out of their EHR investment, **almost three-quarters of respondents said they plan to rely on outside help** (in addition to internal project teams) as they approach optimization over the next two years. More than two thirds said they plan to seek assistance from their EHR vendor in some capacity, while roughly 40% plan to turn to an outside services firm.

The Bottom Line

Realizing more value from the investment in an enterprise EHR is clearly a top priority for this group of respondents, and a large majority reported already having multiple types of optimization efforts underway. Although the sample size is not large enough to be representative of every delivery organization nationwide, the results do provide a good perspective on how a group of market leaders (i.e., CHIME members) are approaching this critical strategic endeavor.

The survey results also underscore some important realities in the market right now:

- **There are *significantly* more improvements in clinical and revenue cycle outcomes that can still be realized from EHRs.** Despite expressing some mild satisfaction with EHR-related improvements to date, more than 70% of respondents still agreed (36% strongly) that the top IT priority for their

organization in the next 12 months is projects that help them realize more value from their EHR investment.

- **Optimization is already happening in many organizations, but specific projects and efforts vary widely.** In fact, only 8% of respondents to the survey said they were *not* focused on optimization right now. It is unlikely most delivery organizations are quite as far along as this group of responding CHIME members, but the results of the survey definitely underscore that optimization projects can take on many forms depending on an organization's specific goals and priorities (department-specific vs. enterprise optimization efforts, projects focused on specific clinical and/or revenue cycle outcomes, etc.).
- **Getting more value out of the EHR investment is *not* just an IT responsibility.** Effectively implementing changes in processes and workflows requires significant input and involvement from operations (as well as other key business units) *in addition* to IT. However, it is worth noting that less than 40% of respondents to the survey cited "hospital operations / administration" as one of the business units that is most successfully partnering with IT to leverage the organization's EHR investment.
- **Optimization challenges are very real, and outside help will likely be needed.** There are many different competing priorities that hospitals and health systems have to deal with right now, and that can make it difficult to give optimization efforts the necessary attention and resources required for success. As a result, many health delivery organizations – just like the CHIME members we surveyed – will likely need to turn to an outside services firm or their core vendor for assistance if they want to maximize the potential improvements possible from their EHR investment over the next few years.

About Impact Advisors

Impact Advisors provides high-value strategy and implementation services to help healthcare clients drive clinical and operational performance excellence through the use of technology. We partner with industry-leading organizations to identify and implement improvements in quality, safety and value. Our Associates are experienced professionals with deep domain expertise and a commitment to delivering results.

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