

MEDITECH EXPANSE

**HOW DO YOU MEASURE
TRUE SUCCESS?**



medSR.com

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PROJECT SUCCESS

Delivering a project “on-time and on-budget” is always a solid start to measuring success. In fact, many people take this for granted and then pay dearly when unanticipated delays cause costs and frustrations to spiral out of control. This measure of project success should not be taken lightly.

However, a well-managed project is necessary but not sufficient as a true measure of success for any MEDITECH Expanse implementation. True project success and excellent results can only be achieved using a structured approach to project management and addressing a broad set of success criteria in all aspects of the implementation process.

The MEDITECH Expanse implementation is one of the largest and most complex projects an organization will undertake. MEDITECH touches the revenue cycle, financials, nursing, clinicals, ancillary (laboratory, pharmacy, and radiology), and all providers using computerized physician order entry (CPOE) and physician documentation. The project touches almost every system user and department in the organization. With MEDITECH Web Ambulatory, physician practices are included in the implementation, which adds another layer of complexity and integration.

True project success and excellent results can only be achieved using a structured approach to project management and addressing a broad set of success criteria in all aspects of the implementation process.

Best Practices and Standard Content / Change Management

System users must become fully familiar with and comfortable using MEDITECH Expanse, so they do not have to think about the steps needed to get their job done. Best practices and standard content create many opportunities for productivity improvements and efficiency gains. They also call for modifying major processes and workflows that may have been in place for many years and are reviewed and updated to take advantage of new system features and functionality.

Management must actively address change management through active staff participation to create an environment of positive change for the organization. Part of this essential change management is to properly engage, train and support all users before, during and after go-live to foster the adoption needed to realize the benefits and ROI of the investment in MEDITECH Expanse.

Big Bang Approach

With the Big Bang approach, all areas go live at the same time, resulting in change across the organization as everyone goes through the process of using Expanse with improved workflows and new terminology. In previous implementations, for example, when CPOE was implemented, all attention was focused on CPOE and physician support. Nursing, pharmacy, laboratory, and IT were all 100% dedicated and committed to the CPOE project. We can no longer focus our attention on just one area.

During a Big Bang approach, additional go-live support for physicians and nurses is critical. It should be considered for an appropriate period to give these users active assistance and confidence in using a system such as medSR's E2E Activation Services®. We have seen rapidly increased rates of user adoption as a result of this at-the-elbow support during this critical period of the project.

Planning & Execution

There is never a “best time” to implement organization-wide projects. The ability to maintain the timeline for the MEDITECH Expanse project plays an important role in determining project success. Careful attention is needed for the scope of the project, as well as a commitment of financial and human resources to support all activities from the beginning. This will ensure milestone dates are met and business objectives are achieved with the implementation. Careful planning, execution and monitoring are essential to minimize impact and keep projects on track and delivering value.

A pivotal part of the necessary planning and execution for a truly successful MEDITECH Expanse implementation project, therefore, is to define, monitor and evaluate a broad array of key criteria that help define true success beyond on-time, on-budget.

KEY CRITERIA FOR PROJECT SUCCESS

Given the importance and complexity of any MEDITECH ExpansE implementation, medSR's early-stage planning efforts with national clients include definition of the intended results and value from the new system along with corresponding key criteria to define success.

Adherence to Scope, Budget, and Resource Allocation

- Project charter with approval and signoff from executive team
- Comprehensive project budget, including MEDITECH software and implementation fees, hardware, peripheral devices, network and wireless updates, interface fees, third-party fees, go-live support, related project fees and contingency
- MEDITECH staffing guidelines and a commitment of hospital staff to fulfill roles on the core teams

Governance with Management Involvement and Commitment

- IT steering committee/executive project governance
- Physician advisory committee
- Project management team
- Revenue cycle/financial leadership
- Clinical leadership
- Core team leaders

Strong Project Management to Meet Milestone Dates

- Clearly defined roles and responsibilities
- Integrated project plan with supporting work plans
- Project milestones and critical path
- Project quality audits
- Risk assessment

Communication Plan for Stakeholders and Constituents

- Framework to manage and coordinate project communications
- Defined structure for project meetings and information exchange
- Objectives, purpose, target audience, message, and delivery
- Relevant, accurate, and consistent messages

Collaborative Team Approach for Decision-Making

- Decision criteria and documentation
- Change management process
- Standardization of processes and workflows
- Integration and impact analysis

Physician Engagement and Adoption

- Early engagement during planning and design phase
- Strong executive support
- Formal Physician Advisory Committee (PAC) charter which clearly outlines roles and responsibilities and requirements for system training and use
- Provider optimization after go-live

Comprehensive Testing Strategy with Test Automation

- Testing plan, including resources to complete testing requirements, and heavy utilization of test automation to ensure adequate, rigorous testing
- Unit testing, integration testing, and parallel testing with requisite staffing and issues management
- Automated testing scenarios and scripts to support unique workflows
- Conversions and interfaces
- Sign off from user departments

Training and Education with e-Learning

- Training plan with requirements and schedules
- e-Learning to reduce training costs, reinforce training, and prepare users for go-live
- Job aids and 'cheat sheets' for user constituencies
- Training coordinator
- Super user participation

Analytics Migration Plan with Data Quality Improvement

- Assessment of pre- versus post-go-live reports and analytics
- Establishment of data conversion/migration and integration needs
- Identification of changes in data and metric definitions
- Crosswalk and other tools to assist decision-makers
- Definition of data quality improvement requirements as part of the project
- Communication and education plan related to analytics

At-The-Elbow Activation Support for Adoption

- 24/7 tailored ATE activation plan, including multi-capable resources
- Turnkey logistics to ensure reliable delivery
- Adoption dashboard throughout go-live period
- Adaptive resourcing and tapering scheme based on adoption results

Post Go-Live Optimization

- Continuing education and support of providers to further enhance productivity and system use
- End user refresher training to review and reinforce new processes and system usage
- Continuation of the charge reconciliation process to monitor charges, rejections and revenue reports
- User observation & assessment for workflow optimization and efficiency
- Metrics audit to assess key clinical, operations and revenue cycle areas

TRANSITION MANAGEMENT PROGRAM

Again, delivering a project on-time and on-budget cannot be used alone as a measure of success. In addition, the key question should be: “Did the project deliver value to the organization?” For example, a project could be delivered on-time and on-budget with no guarantee of adoption, ROI and tangible business and clinical benefits.

Measuring realized value beyond the above criteria for success is best done through defining key performance indicators (KPIs), or metrics, agreed on by stakeholders to reflect the goals and objectives of the organization – and to protect key performance results, including revenue integrity. medSR works with clients to define advance KPIs that are:

- Established at the beginning of the project and listed in order of priority
- Directly related to and supported by business goals and objectives
- The basis for critical decision-making throughout the project
- The basis for acceptance of the solution by the customer at the end of the project

While each client’s goals and objectives are unique, common KPIs for a MEDITECH ExpansE implementation may include:

Patient Safety - Key Performance Indicator #1

- Closed loop medication administration
- Medication error rate
- Streamlined discharge process (decreased time and reduced order errors)
- Reduced paper and increased system use, with the goal of eliminating paper medical records
- Bar code scanning rate for medication administration
- Electronic discharge instructions with access through patient portal
- Reduced errors at transition points (transfer between departments)

Physician Engagement - Key Performance Indicator #2

- CPOE, Documentation, Medication reconciliation, and e-Prescribing rates and maintained or improved case mix
- Transition of care order management (reduced order errors)
- Reduced health information management (HIM) documentation deficiency
- Maintained or improved case mix

Revenue Integrity Charge Capture - Key Performance Indicator #3

- Reduced or eliminated manual entry of charges into system
- Supplies scanning for charge capture
- Charging for medication on administration

Revenue Integrity A/R Days - Key Performance Indicator #4

- Billing and accounts receivable (BAR) conversion validated and balanced
- Cash collections
- Denial rate
- Clean claims rate
- Discharged not final billed (DNFB) rate

In addition to KPIs, key operations metrics are carefully reviewed and continuously monitored after the go-live to proactively identify problem areas that need attention and focus for corrective action. medSR provides metrics that are selected and collected at the start of the implementation and monitored during and after the implementation.

SUMMARY

Implementation of MEDITECH Expanse, or any new EHR platform, is a tremendous investment and risk for any organization. Success cannot be measured by on-time, on-budget alone. Being on-time and on-budget is no guarantee that the project will deliver the value expected and required by the organization.

medSR's extensive experience through a track record of 100% success in implementing MEDITECH Expanse demonstrates the criticality and power of combining key criteria for success with a Transition Management Program based on results-oriented KPIs. This time-tested approach helps organizations to look back in the years ahead on the implementation as worth every penny' and then some.

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ABOUT medSR

While the name may be new, our history is not. MedMatica Consulting Associates and Santa Rosa Staffing merged on January 1, 2021 becoming medSR, significantly increasing our healthcare industry presence. We provide a complete portfolio of IT and Operational services including strategic consulting; EHR implementation, training, activation, optimization, and support; while also assisting with a full range of revenue cycle consulting and managed services.

medSR has provided MEDITECH technical and consulting services for more than 30 years and has a reputation for delivering exceptional value to clients.

- ▶ More than 75 MEDITECH implementations completed
- ▶ Zero projects delayed or halted for a 100% success rate
- ▶ Full-service deployments from Design through Revenue Integrity
- ▶ A history of MEDITECH "FIRSTS"
- ▶ Largest MEDITECH 6.1 conversion
- ▶ Largest Ambulatory MEDITECH 6.1 conversion