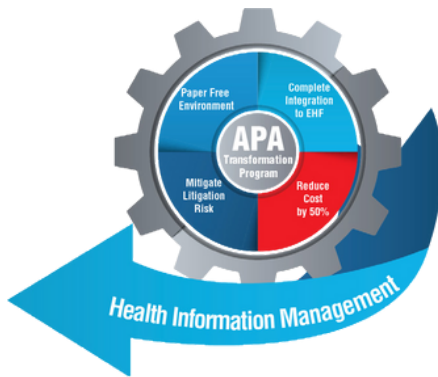# Case Study:

Health Information Management

Optimization and Consolidation Program

Case Study:
Health Information Management Optimization and Consolidation Program

We repurpose assets, increase productivity, and decrease risk. We endeavor to remedy a client's process and organizational issues, as well as challenges to the brand itself, by addressing critical core functions that have become less effective. Disharmony between an organization's objectives and requirements and their process and organizational structure is an entrenched challenge among the companies we serve. These challenges are found across a broad range of industries, but nowhere are they more prevalent than in Healthcare. In these situations, organizations often recognize that solutions fall outside their core competencies and seek the specialized help to deliver value-based, self-sustaining solutions.

Tailored to the health care industry in this instance, APA's program aimed to resolve the disparity between historical, physical patient records and active patient care, which widens relative to the size of the organization. The requirement to update the EHR (electronic health record) and keep these platforms current worsens the already complex nature of historical documentation and contributes to unreliable attempts to modernize overall Health Information Management. Consequently, this leads to higher potential costs and greater risk of litigation. Accordingly, value-based, quality medical care depends upon efficient, integrated, dependable, and virtually risk-free internal records systems. An institutional attitude that deems paper records irrelevant or obsolete fails to appreciate just how prone to error they may become through inattention or neglect. In the scramble for technological adequacy, historical records are often boxed and sent to storage with little regard for the issues of availability, findability, and retention that will arise further down the road or, even worse, an assumption that the problem will sort itself out with time. This of course results in further issues and skyrocketing costs due to institutions or physicians missing patient records, rescheduled appointments, paper charts not being indexed to the patient database, the EHR missing clinical histories, and the costly real estate needed to store records. Through these challenges, the "Continuity of Care" and the compliance of the organization can unravel and go unrestored until a formal plan for retention and records governance, a lucid paper history, and a commitment to sustaining the quality of records are introduced.

Problem: Above PAR Advisors was sought out by a major New York university and teaching hospital to alleviate organizational and documentation inadequacies that had persisted for decades and create a central, efficient environment for clinical health records.

APA encountered numerous deficiencies in the institution's existing environment. Records were improperly marked, with volume and content unknown in many cases, while the inventory volume was available through only one vendor which sported a "failure to find" rate as high as 63%. Unprofessional, non-compliant conduct on the part of one vendor even necessitated legal action by the university. Not surprisingly, the overall litigation risk was deemed "high". Internal records behavior fared likewise and did not align with the goals of the organization.

Result: The program met budget and enabled the Entire Project Expense to be fully self-funded with 100% ROI within the existing (1st) fiscal year. Additionally, this transformation program placed the organization in the 1% class of health information compliant healthcare and educational institutions. Above PAR delivered a self-sustaining Health Information Management environment that ensurec the integrity of the longitudinal care record and placed the department on a 7-Year Path to "Paper Free" status, virtually eliminating records storage and off-site storage costs by the end of that timeline. The program's success proved convincing enough for the university's Dean to approach and share the results with the Vice-Chancellor in the hope of distributing the information (outlining the aforementioned problems, objectives, outcomes, benefits, cost savings, and risk reductions) to other colleges within the broader university. That the institution's senior leadership felt the program could bring additional improvement beyond its initial application affirmed its value and viability.

Program Outline

Vision: Create a single-sourced environment for existing clinical health records that reduces risk, streamlines operations, and substantially reduces cost.

Objectives:
• Implement a transformation program which consolidates and optimizes all operational records functions
• Optimize existing storage, health records, vendors, resources, and college space utilization elements
• Render transformation initiatives to be enabled by, and compliant with, the EHR platform
• Create and implement a new, compliant, and institution-specific retention and governance model for clinical health information records

Key and Detailed Deliverables:
1. Health Information Management Process and Resiliency Framework – Retention and Governance Model (all created)
2. Self-sustaining operating model, transformed and modernized patient health information management center, data and digitalization driven, and clear and precise processes for managing clinical longitudinal records (all delivered, driving optimal clinical care)
3. New Information Management and Storage Vendor – Strategic Partner – Migrated > 18,000 boxes, indexed > 850,000 records (individually bar-coded for 100% accuracy and location), resolved > 1,700 boxes of non-records contents (some 30+ years old) – less than 0.001% of records will remain unidentifiable – and, jointly with EHR team, reconciled and established an accurate Master Patient Index (MPI) of > 850,000 patients
4. Put the institution on a "7 Years to Paper Free" Program and established a new Health Information Management environment
5. Reclaimed for the institution approximately 1,500 sq. ft. of Vital Clinical footprint, transformed from records use to newly usable space (available for conversion to revenue-generating clinical use or alternative expansion needs)

Challenges Encountered and Resolved

1. Eliminated unknowns: patient records, box volumes, content identification, and inventories.
2. Eliminated truculent behavior of existing vendors who gave no transparency into: facilities, resiliency, protections, and asset distribution.
3. Removed Contingent Liability by eliminating the institution's previous vulnerable position to industry "Hostage" Fees that auto-rolled over and were permanent.
4. Extricated the institution from unenforceable, expired vendor contracts.
5. Reduced the discovery expense risk, overall litigation risk, which we rated HIGH based on non-resilient conditions, and non-compliance of off-site vendor's facilities, as well as restoring their box/chart-tracking performance.
6. Implemented 100% findability and accuracy vs. the previous vendor's performance, which we rated as POOR with a "failure to find" rate as high as 63%.

Critical Success Factors: Benefits, Cost Reduction, and Containment

1) Achieved a Net $3,500,000 cost reduction
2) Delivered $850K in additional cost savings vs. original $2.9mm savings target
3) Met budget and enabled the Entire Project Expense to be fully self-funded with 100% ROI within existing (1st) fiscal year
4) Negotiated rate hold with new Strategic Information Management and Storage Vendor for 5-year term, delivering 45% reduction in fees and rates, and created a No-fee initial record and box destruction program, saving an additional $75,000
5) Initiated a 5-year 85% reduction program for paper health records via newly crafted retention and governance model

6) Achieved 100% accuracy and findability via newly established records location tracking controls
7) Substantially reduced existing discovery and litigation risk related to Records Management
8) Integrated new Patient Health Information Management processes into overall institutional Data Governance Initiatives
9) Increased the safety and resiliency of patient health records environment to levels never before achieved
10) Ensured institution is well poised for exceptional 100% compliance and delivery results for Patient Health Information and all potiental audits

Sharing Best Practices: Rates, Terms and Conditions, and Partner Support for optimization can be extended to and implemented in any university division and, thus, potentially reduce costs by an additional 50%.

About:

Based in New York City, Above PAR Advisors, LLC is a consulting firm that deploys strategy, innovation, and organizational design to strengthen clients' organizations and companies all over the world. Our principles of Performance Analytics and Resiliency result in high-performing, resilient entities.

Upon analyzing an organization's challenges, we develop and implement transformation programs that mitigate risk, enhance operations, embed a safety culture, and sustainably reduce expenses.

Our teams comprise cross-disciplinary specialists, including former partners from the largest global consulting firms and Fortune 50 Technology firms, and (where appropriate) specialty partners to accommodate each project's unique challenges and complexities. Steeped in global experience and relationships, we specialize in verticals such as Healthcare, University and Teaching Hospitals, Utilities, Legal, Finance, Public Sector, Government, and NGOs, including institutions such as the UN.

We drive savings and future-proof our clients to ensure continued benefits.

Contact Us Today

For more information on how Above PAR Advisors can assist your organization, visit us at **abovePARadvisors.com**

Phone:
+1 (877) 425-7051

Email:
info@abovePARadvisors.com