Health System Achieves Data Alignment Breakthrough

A large health care system needed a single, comprehensive solution to support a national employer reporting program and enhance its appeal to current and prospective customers. The program is meant to provide clinical use reports to employer groups to help them improve care quality and control coverage costs.

Problem to Solve

A large health care system had previously implemented an analytics platform and was delivering clinical use reports to employer groups to help them improve care quality and control coverage costs. The consistency and usefulness of these reports was compromised due to data source and business rule disparities across the health care system's multiple state locations.

Rather than relying on disparate clinical data that varied depending on geography, the health care system needed a single, comprehensive solution to support a national employer reporting program and enhance its appeal to current and prospective customers. It had previously attempted to document and develop such a program and lacked the internal expertise and capability to fulfill this initiative. The health care system engaged Freed Associates (Freed) to tackle this project.

Strategy and Tactics

For health insurers, being able to provide advanced clinical analytics and reporting to employer groups requires

two key ingredients. The first is developing a common and consistent set of metrics across the enterprise. The second is having a robust analytics platform to deliver these metrics in a timely and actionable manner.

The health care system representatives who would provide input and oversight for this project were located in multiple states, which complicated project management and decision-making. Freed began by analyzing the existing project plan and proposed several recommendations to meet the client's single-solution objectives, while also factoring in the realities of the organization's business and IT needs and capabilities.

Almost immediately, it became apparent that gaining buy-in and engagement among key project contributors would be crucial to this project's success, particularly given the similar past effort, which had not succeeded. Without sufficient buy-in, support and engagement from key project contributors, this new initiative would falter before it officially got off the ground. Freed identified the key stakeholders necessary for project success, and established trust and open communication with each contributor. This degree of outreach and engagement proved vital, as a considerable amount of time and effort was eventually expended in this project to align some 200 data definitions.

To help achieve alignment, the next step in this project was performing a gap analysis to identify differences in the data sources and business rules for metrics used among the health care system's various regions. This was a critical project deliverable, as this gap analysis eventually became the foundation for the new clinical file extract layout, which would provide a single source of data inclusive of input from multiple geographies.

The new clinical file extract layout included a variety of new rules, including a data model detailing the data sources and data flow necessary to support the clinical extract. These rules also described the business impacts and requirements of the clinical extract.

Throughout this effort, Freed representatives provided a variety of subject matter expertise, and developed a business work plan for implementing the new clinical extract. This work also yielded new tools for project governance, risk and issue tracking and scope documentation.

Results

By aligning its clinical data definitions, and creating a new, centralized clinical data solution out of a variety of existing regional solutions, the health care system achieved its single-solution goal. This included documenting implementation-ready requirements and developing a common data extract layout for approximately 200 clinical metrics. From a business standpoint, this will be a crucial differentiator in separating the breadth, depth and quality of the health care system's clinical data from that of its competitors.

A hallmark achievement of this effort was the ability to gain buy-in and consistency among the health care system's contributors, who often had widely varying opinions on the new data definitions. This was made possible

by Freed's neutrality and objectivity as a subject matter expert in clinical reporting. In the end, the contributors' expectations and input were sufficiently aligned to achieve consistent and ongoing collaboration among all of the contributors.

The client was pleased with the quality and immediate business applicability of this work. The director of the health care system's analytics and applications department commented: "Freed quickly integrated within the team, raised risks before they become issues, and thoughtfully presented ideas."

Conclusion

By having a new, national standard for its clinical reporting and information sharing, the health care system is now able to provide its business groups with far more consistent, accurate and impactful information to help improve care quality while reducing costs. The health care system anticipates that this data breakthrough will help the organization retain its current customers and distinguish itself in the marketplace to grow its business.