

Prepared for you by the staff and management of ICG

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ICG Vice President of Services



Diane Feyen (pronounced 'fine') has over 17 years of health-care IT, consulting and executive management experience. Her focus has been on the management of implementation teams, development of project managers and methodology, leading Ancillary implementations and Data Center consolidations.

As our Vice President of Services and an invested partner of Innovative Consulting Group, Diane has been a part of the Senior Management Team since ICG's beginning. With a history of consulting and half of her career spent traveling on a weekly basis, she feels a strong connection to her consultants and is very excited to be working with the Services Team and their customers.

Diane sees her role as VP of Services as an opportunity to be an employee advocate as well as the Customer Engagement Manager. This allows her to be in contact, on a regular basis, with the consultant as well as the customer(s) they are consulting for. She is committed to the belief that the personal and professional growth of her consultants will result in a greater cumulative business knowledge.

Ethics are vitally important to Diane. As a company, ICG holds a Core Value that 'Our integrity is paramount to our ability to attract and retain customers.' Diane brings to ICG her personal business ethics that revolve around being efficient, effective, caring, having fun, and communication, communication, communication!

With Diane's leadership, ICG will continue to share a common vision of partnership and successful business outcomes with our customers.

Introducing Darien Hallagan, Director of Business Development

Darien Hallagan has accepted the position of Director of Business Development effective 11/29/04. Darien worked for McKesson for six years and was hired as part of the Sales Rotation Program, where he had the roles of Application Analyst, Project Manager, Sales Support, Sales Associate, R&D analyst, and completed an internship at Rockdale Hospital. Darien then became a Sales Associate and was promoted to Sales Rep in 2001 for McKesson. Darien has spent the last year as a New Sales representative for Softmed, and is a welcome addition to our Sales Team!





Mike Harp

Consultant Spotlight:

Mike Harp

Mike Harp, Senior Healthcare Consultant, has been in healthcare for over 15 years and joined Innovative Consulting Group in October of 2003. Mike lives in Evansville, Indiana with his wife of ten years, Lisa, and their “healthy, happy, smart, and beautiful daughters” Britlee (8) and Bailee (5). He is currently engaged at Deaconess Health Systems in Evansville (see Deaconess Health System’s article in this edition).

Mike spent 12 years as a senior systems analyst and programmer, working primarily on the technical side of INVISION[®], Enterprise Access Directory (EAD) and Signature (software installs and applying updates) as well as VSDM, SQL, COBOL and Visual Basic programming. He wrote processes to identify and automatically clean up MPI environments (in INVISION, Signature and EAD), automated processes to generate, verify and submit IRS W2 information for all Ascension Health hospitals, and automated several steps in the Siemens SUT (software update tape) process. He also developed processes to back-load Signature and non-Siemens applications into EAD (was not generally available from Siemens at the time) and integrated a non-Siemens application into EAD using OPENLink[®] and Datagate[®] interface engines.

So far at Deaconess, Mike has developed a detailed plan on implementing EAD into several of their non-Siemens applications (note: Deaconess has decided to put EAD implementation on hold at this time). The detailed plan included a written Executive Summary for board presentations including a project overview, justification, costs, etc.

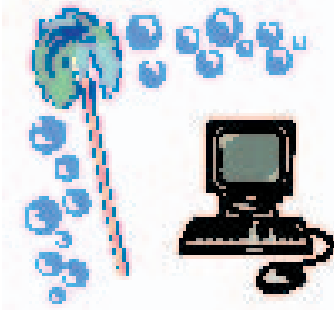
He has also developed an application that takes the INVISION audit logs, parses the data and loads them into a SQL database. A window front end gives the user several ways to access the audit data (by user ID, username, patient, patient name, date, time, etc). Reporting from the queries can also be generated. Within the application, there are two additional reports: inactive user ids (user can specify number of days to go back to determine if inactive) and a report of users that access patients that have the same last name. These were specifically requested by Deaconess.



The individual audit reports (usually 200K each) are automatically zipped by over 90% into an archive directory saving disk space. Mike wrote an application that displays a patient’s social worker and case manager when their physician signs on to Siemens’ dashboard application.

Window screens allow the updating of physician groups, managers and social workers either individually or by bulk changes (as an example, Jane is out of town for the week, so John will be assigned to all physicians originally assigned to Jane). Recently, he wrote a VB program that entered Charge Description Master records into the test environment for Deaconess’ new Gateway hospital. The process mimics a user but is much quicker and more accurate. The program loaded about 16,000 entries in a matter of hours. He is currently writing a VB script to do the same thing for the Service Master, entering 16,000 records in a few hours and with very high (if not 100%) accuracy.

continued on page 3



Mike's

EAD Clean-Up Tips

.....by Mike Harp

Mike Harp *continued from page 2*

Now Mike is busy writing a program that will pull information from a spreadsheet that contains patient number and the amount of expected reimbursement. That information is then used to pull additional demographic information from the INVISION WX (similar to INVISION PIDX) to provide detailed information to a revenue tracking system. He is also writing a process that takes the potential duplicate enrollee report from EAD and eliminates listings of physicians that have been to the hospital as a patient (listed in EAD twice, as a doctor and as a patient, appear to be duplicates but are not), This will reduce Deaconess' report by over 80% and will redisplay the report in more user friendly format. He will be writing a process that will take text files from specified directories and zips them into an archive directory on a date specific basis. The process is parm driven which makes it very dynamic and requires no programming changes to include/exclude directories.

When Mike isn't busy programming, he enjoys playing basketball and golf, watching most sports (especially high school and college level) and playing with electronic gadgets. He serves on an advisory board for a large, government owned park that provides recreational and educational experiences for all ages, with emphasis on the children. He likes to build things and do general work around the house and had the opportunity to work on a couple of Habitat for Humanity houses locally. He is also a gifted amateur photographer and lends his talents to *The Innovator*. Thanks Mike!



How can you reduce admission time, improve patient satisfaction and increase data integrity among all your facilities? Enterprise Access Directory® (EAD), an Enterprise-wide MPI integration solution from Siemens, can provide these benefits. Once a patient visits a hospital, clinic or any physician's office within a system, the need for the patient to re-submit personal and financial information is eliminated with EAD integration. Additionally, EAD sets the foundation for the Siemens' clinical data repository, Lifetime Clinical Record (LCR). With LCR, historical clinical information is maintained and shared across the same continuum of care.

The landscape of hospital environments seems to be in constant change. With this comes the need to keep all the entities within a healthcare enterprise and their disparate systems integrated and capable of sharing information across the continuum of care. Merging of multiple healthcare systems became somewhat common over the past many years. Now, with more focus being placed on clinical applications, these large healthcare enterprises are looking to integrate ancillary systems into a single MPI solution.

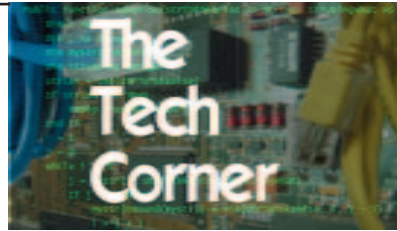
INVISION® and EAD Passwords Out of Sync?

When INVISION users perform an EAD inquiry, the user is automatically logged into EAD via a \$XFER command. If the passwords between the two systems become out of sync, the user will receive an error message in the middle of the registration process.

To avoid this situation, EAD profile PRMAH can be valued so passwords for users coming from INVISION via \$XFER are not validated. To enable this option, value PRMAH accordingly:

```
BYPASS PASSWORD CHECKING FOR $XFR USERS TO  
THIS DESTINATION: Y
```

Once the profile is changed, enter command SXIT HOSP=rrhh from a clear screen (ICO clients only) to update OAS Shared Storage or wait until the CICS is bounced. For RCO clients, contact Siemens to execute the SXIT command or wait until the CICS is bounced. ☒



*ICG's
tips, tools,
& news
you can use!*

Patient Friendly Statements by Jack Goggins

For the past several years, the Hospital Financial Management Association (HFMA) has recognized what patients have known for years: hospital bills and statements are confusing, if not incomprehensible. Bills and statements contain either too much information, resulting in confusion and unnecessary calls to the business office, or too little information, resulting in bewilderment and no calls (or payments!). Statements, the main method of communicating account information to patients, have led to disenfranchisement rather than enlightenment.

In an effort to reverse this situation, HFMA promoted the “*Patient Friendly*” statement initiative. Through patient surveys and focus groups, HFMA identified what patients want to see on their statements. Despite these efforts, many HIS vendors have not fully adapted methods to show the information patients want to see.

Fortunately, a number of print vendors have embraced the cause and offer comprehensive and flexible options for hospitals to develop statements that best meet their patients’ needs. Some vendors even offer online options for patients to view and make payments to their accounts through the internet.

Hospitals that have implemented their versions of Patient Friendly statements have experienced better communications to patients, improved patient satisfaction with the collection process, and increased cash flow.

The process of implementing Patient Friendly statements requires a thorough analysis of current operations, including the hospital’s Patient Accounting system, as well as a redesign of what the new statements should contain. The hospital must also develop new logic for selecting accounts from their Patient Accounting system in order to have them receive the appropriate messages for their place in the collection process. Furthermore, the hospital must determine the best source(s) (UB92, standard reports, user-developed reports) from their PA system to gather account information to send to the print vendor.

This is also an opportunity to totally redesign your collection process and combine the best features of your Patient Accounting system with those of your print vendor. You should not simply try to replicate what you already have in place. Rather, take the time to decide what the ideal process should look like for your hospital and develop an overall plan to include patient statements that will supplement your collection efforts.



Although the print vendor can be very helpful in this process, it can be most beneficial to have an experienced consultant assist with the implementation. A consultant familiar with Business Office operations and PA system functions, as well as experience gathered from work with a variety of hospitals, can provide an objective, “*outside the box*” view of the hospital’s plan. The consultant can recommend what has worked (and what has not worked) at other hospitals that you may not have considered. The consultant can challenge your approach so that you do not limit your plan and miss opportunities to cover a broader portion of the collection process.

This may extend the installation of the new statement series, but it will be well worth the additional effort when you reap the benefits of more automation, improved staff productivity, better patient satisfaction, and, of course, increased cash flow. ☒



Left to Right: Russ Brown, Mike Neeley, Lisa Kochersperger, Clark Conway, J.J. Mohr, Nancy Menke

Client Profile:

Mike Neeley, CIO

Deaconess Health Systems
Evansville, Indiana

Deaconess Health Systems in Evansville, IN is a dynamic force in Healthcare Information Technology. The Deaconess Health System consists of Deaconess Hospital, an acute care teaching hospital; The Women's Hospital for the special needs and concerns unique to a woman; Deaconess Cross Pointe, a behavioral health and chemical dependency hospital; Deaconess Gateway, a new, under-construction 116-bed facility; and the Deaconess Medical Group, serving patients at their clinic offices and urgent care services located throughout Evansville and surrounding communities in southern Indiana, southern Illinois, and western Kentucky. The Information Services Team at Deaconess has a user base of over 3000 individuals.

Mike Neeley, CIO, is responsible for the entire Deaconess Health System IS software and technology infrastructure, the data and voice communications network, pagers, and cell-phone access. The IS department is located centrally at the main hospital campus, providing personalized support with a staff of 53. Mike has been with Deaconess for a little over seven years, and is very proud of his senior staff. Although this article is a "CIO Spotlight," Mike wanted to shine the spotlight on them!

Lisa Kochersperger, Applications Division Manager, and her analysts provide level 2 operational support for 275 installed applications and manage a project portfolio comprised of nearly 100 active new development or system enhancement projects. When support calls cannot be resolved by the Help Desk, they are escalated to the Applications Division staff for research and resolution. In a project leadership role, the Applications Division team members coordinate new system selection and implementation efforts for all Health System entities and oversee contract negotiations for all IS-related technology and services purchases.

J.J. Mohr, Manager, HIS Project Team, managed the implementation of the Siemens INVISION system in March 2003. His current, assigned project is the development of Information Services infrastructure and technology for the new Gateway facility. This project will include new concepts like bringing building automation systems and clinical systems to a single network platform. It will also provide a clinical information system platform and patient access to bedside terminals, as well as, barcoding, eMAR, and clinical documentation products for the clinical staff.

"I have always found the ICG consultants to be extremely professional and efficient. They have augmented my staff and assisted us in maintaining our high degree of customer satisfaction... They have always been a welcome addition to my team..." Mike Neeley, CIO

Deaconess is happy to welcome Nancy Menke, Supervisor of Information Services, to the new Deaconess Gateway facility.

Russ Brown, Telecommunications Supervisor, is keeping Deaconess ahead of the healthcare industry by seeking out new and better communications technology. Before it was commonplace, a fiber-optic network was in place at Deaconess, as well as a wide area network, frame relay point-to-point, Internet access with redundant firewalls for security, and VPN access for remote users. Russ and his team have recently implemented a wireless network infrastructure at the main hospital. Russ also manages the telephone system, long distance, cell phones, and pagers.

Clark Conway, Supervisor of the Help Desk, believes that his team is "the finest Help Desk in the Tri-State area." With only 13 employees, the Help Desk provides front-line support for over 3000 Deaconess employees and physicians. Challenged by so many applications, the Help Desk staff must be versatile and have good working knowledge of many applications to provide ready support. With an annual increase of 25% in support calls, Clark says that the secret to Deaconess' Help Desk success is the quality of the response to the calls. The Help Desk staff provides personalized attention, making each user feel their call is the most important.

Deaconess IS Senior Management believes their 'Best Practices' include:

- * High customer satisfaction with supported systems.
- * Wireless technology enabling the physicians to access information from their PDAs, GE Centricity PACS/RIS, with plans to integrate Radiology and Cardiology image management in the next 12-15 months.
- * Electronic Document Management using Hyland's OnBase® product, for document creation, image scanning, workflow, and electronic document distribution via a variety of presentation tools. This technology will reduce cycle time for routine processes by enabling records and documents provided by patients to be scanned into their files and distributed to other systems and patient-care staff. Staff recruitment is improved as more flexibility is introduced by this technology; for example, medical record coding is now performed remotely by telecommuting staff.

UPCOMING EVENTS

2005 HIMSS Conference

Dallas, TX
February 13-18, 2005

For more details, please visit:
<http://www.himss.org>

Please join us at
Mondeul's
Hyatt Regency
300 Reunion Boulevard
Monday, February 14
from 4:00pm - 6:00pm

How did we do?

"All of the ICG consultants are valuable to Deaconess Health System I.S."

We use consultants for only two purposes: either to provide knowledge and expertise that we do not possess internally or to augment our resources when we do not have the required staffing capacity.

In both situations ICG has been responsive and has provided superior resources."

*Lisa Kochersperger, Applications Division Manager
Deaconess Health System*



Deaconess Health System.....*continued from page 5*

Deaconess IS has big plans for the future—there is an effort underway to implement an Electronic Medical Record for Physicians' offices for the Deaconess Medical Group. Physicians will be given Computerized Physician Order Entry (CPOE) in the next two to three years. Bar Coding Clinical Documentation will be available throughout the facility. And to maintain the high customer satisfaction scores during this massive culture change, the IS staff will continue to develop a shared knowledge base for the Help Desk as a support tool.

Innovative Consulting Group salutes Mike Neeley and the Deaconess Information Services Senior Management as they continue to search for new technologies within and outside of the Healthcare environment for Best Practices in Information Systems! ☒

