



AMDIS 2015

Coray Tate
VP Clinical Research
June 2015

WHAT WE ARE TRYING TO DO

Goal = Amplify the voice of the provider and facilitate turning provider feedback into provider success.

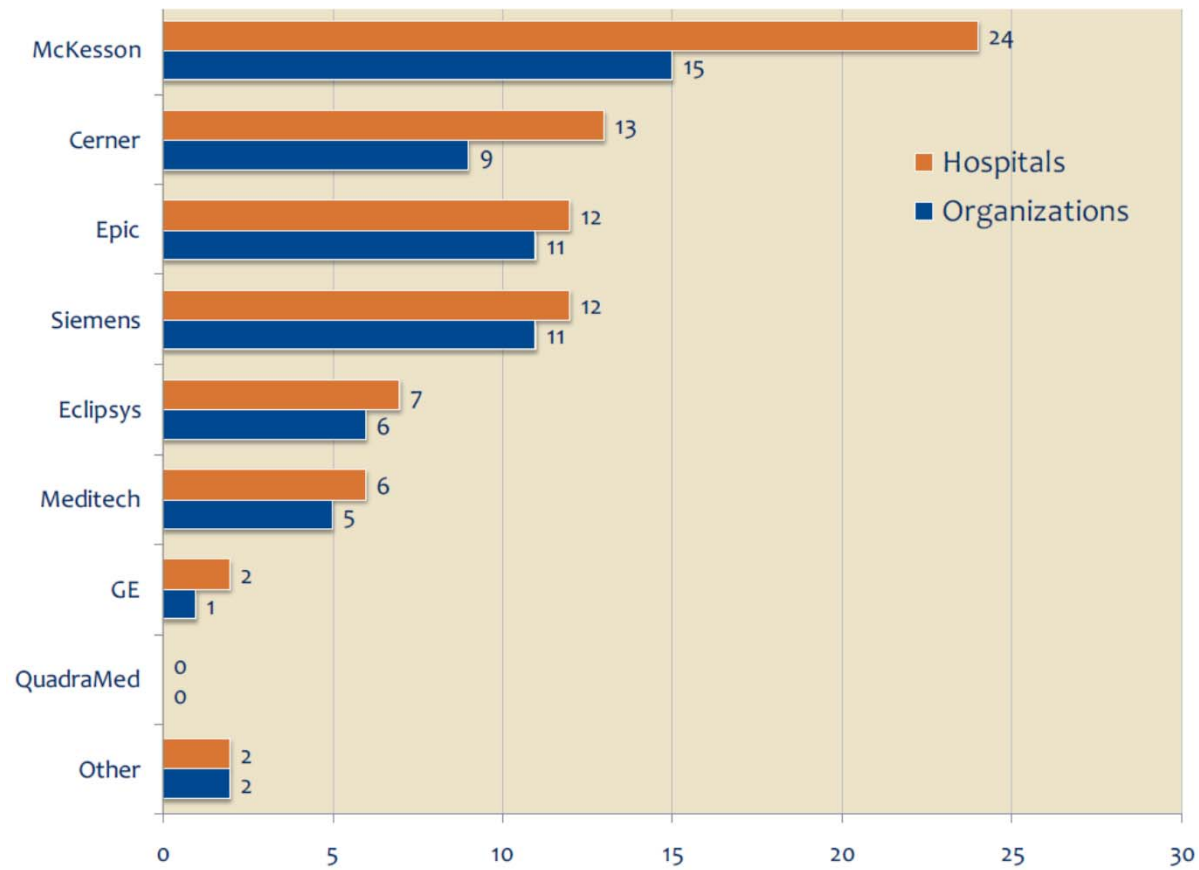


MESSAGE TO VENDORS

HOW DO YOU MEASURE SUCCESS?



2007 LARGE HOSPITAL WINS



THINGS TO CONSIDER:

1. **This is not natural.** There is a conflict between serving the customer and retaining a profit.
2. We measure what we want. **We don't typically measure what is most critical.**
3. Little real time is spent on how to make the client successful. **That takes lots of listening.**
4. **The customer is not always right,** but the customer always wants success.



PAYING FOR AN OUTCOME

*We do try to tailor the packages to our customers, almost to a fault. There are some things that we do. **We have taken interfaces off the table--all interfaces you want are included. We try to also push certain interfaces.** With training we have been trying to do what the client wants and that is what gets us in trouble. **The client can get a smaller training package, but then we will not follow through, nor should we, and hold back training that will make them successful.** We end up giving away some training for free in many cases.*

What they are really paying us for is the outcome that they expect.

-Vendor President
KLAS Score = 89.5

ACUTE CARE EMR MARKET



MARKET CONSOLIDATION

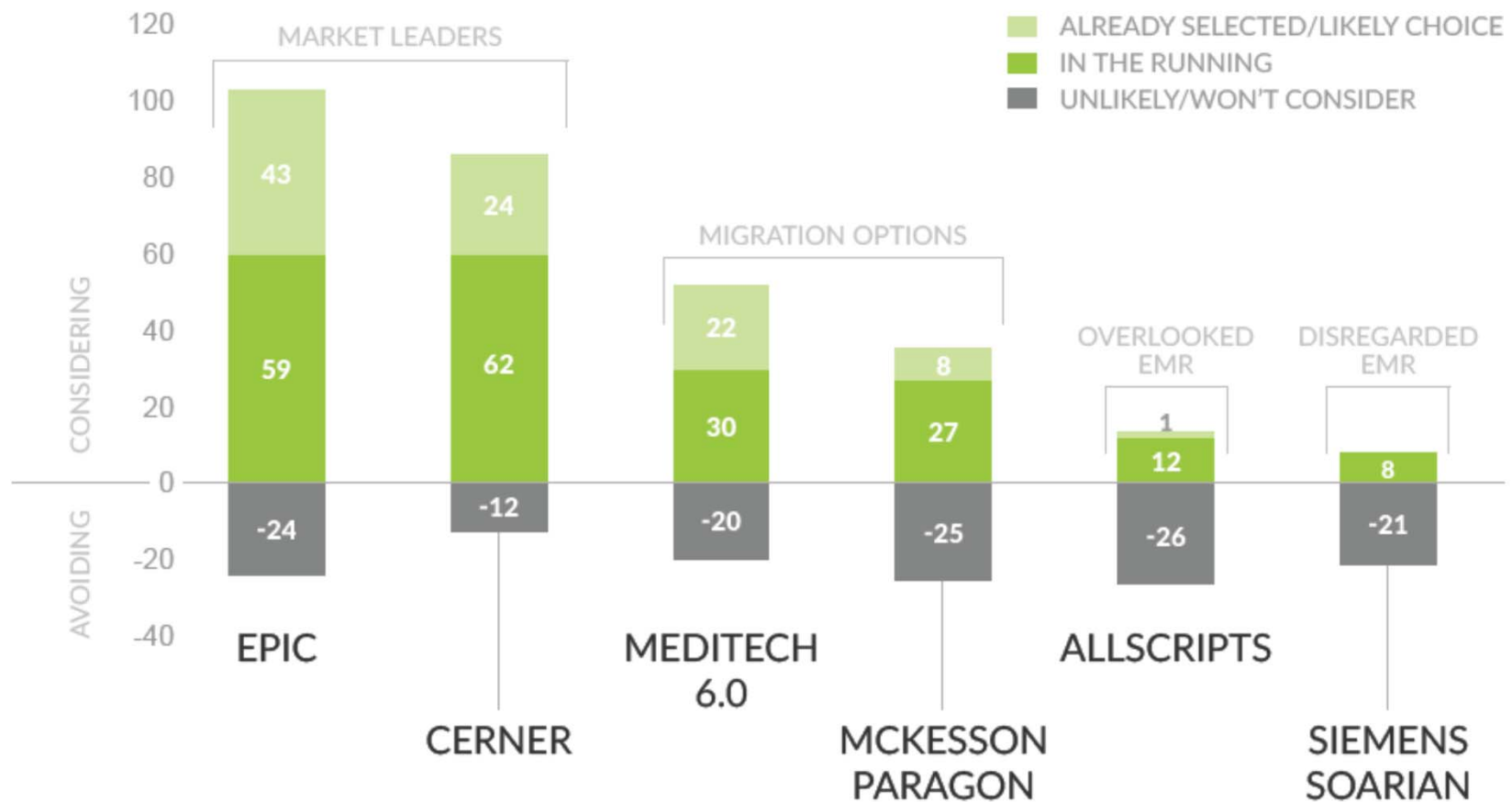
- Allscripts
- Cerner
- Epic
- GE
- McKesson
- MEDITECH
- QuadraMed
- Siemens



CONSOLIDATED MINDSHARE

CONSIDER VS. AVOID

*If you are considering replacing your EMR, which vendors are you considering?
How many hospitals are involved in your decision?*



BIG INVASION OF SMALL HOSPITAL MARKET

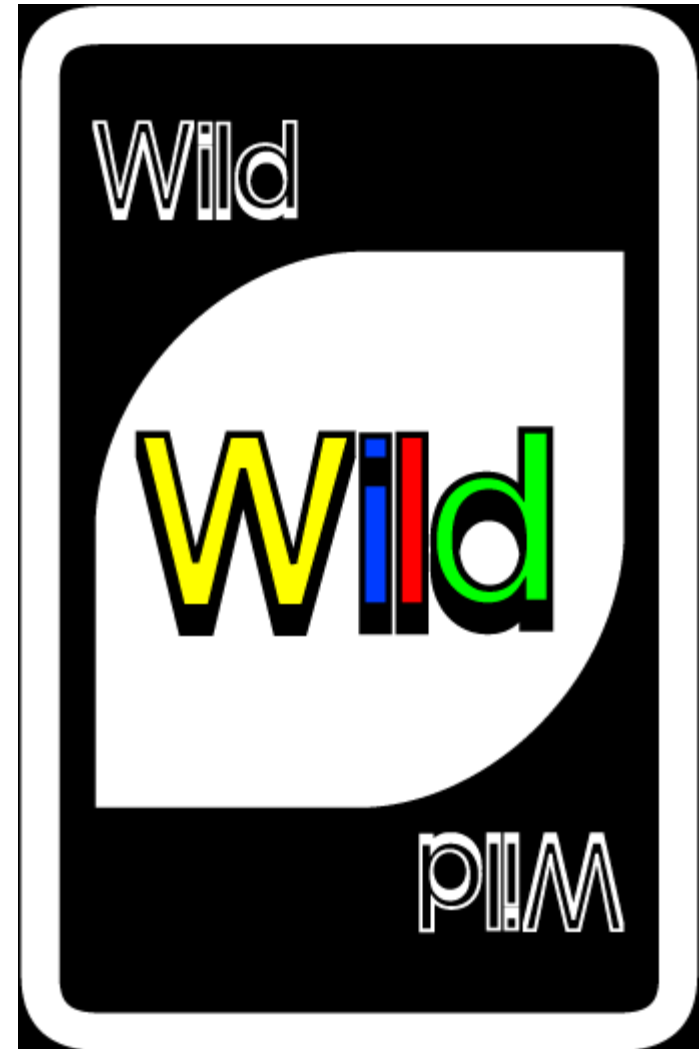
Epic and **Cerner** won **62%** of the small hospital decisions.

*2014 Acute Care EMR Market Share report



MEDITECH WILD CARD

- Largest legacy customer base.
- High expectations for 6.1x web based solution.
- Has not historically been strength.
- Fork lift replacement.



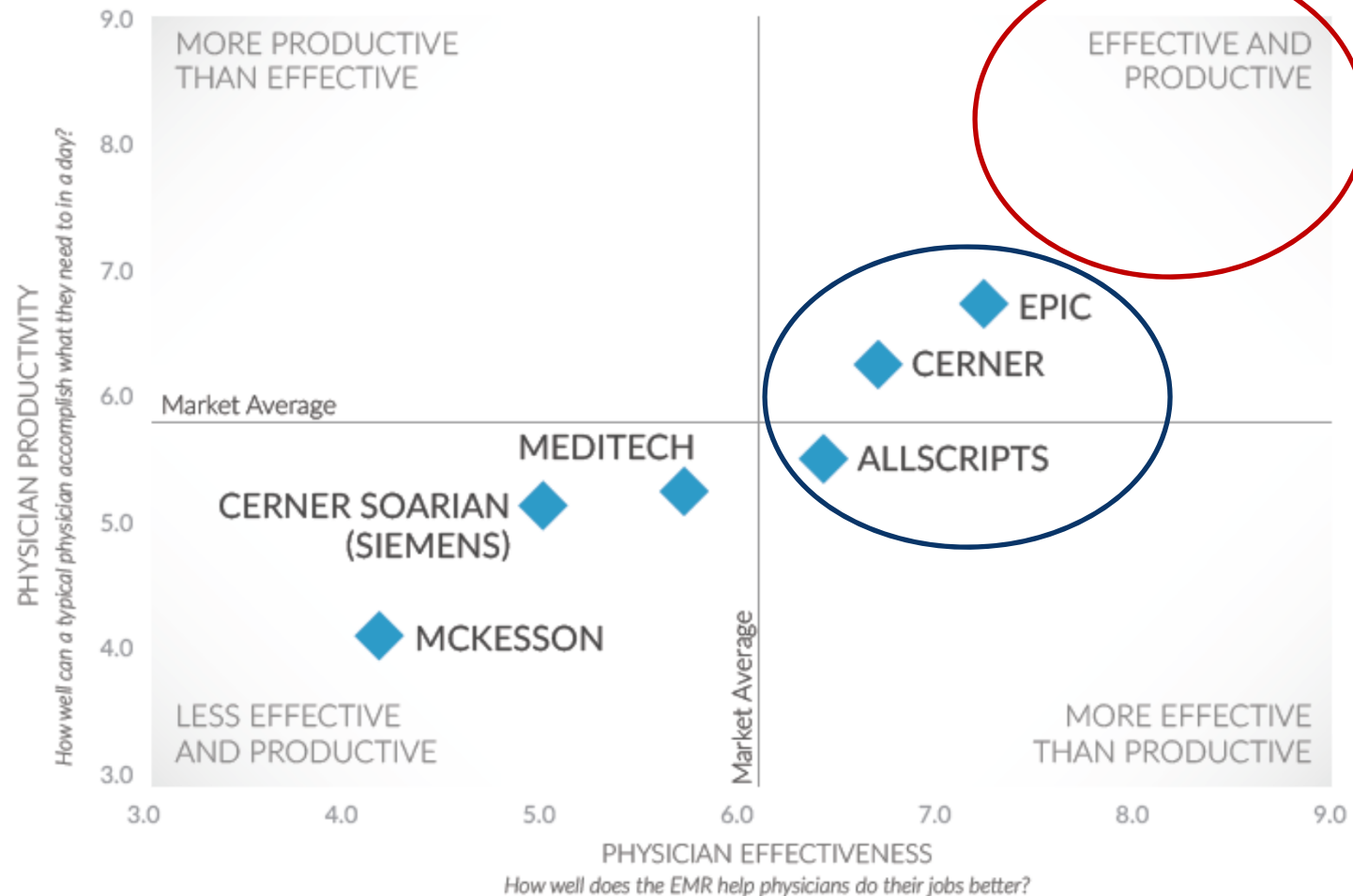
EMR USABILITY PROGRESS



PRODUCTIVITY AND EFFECTIVENESS

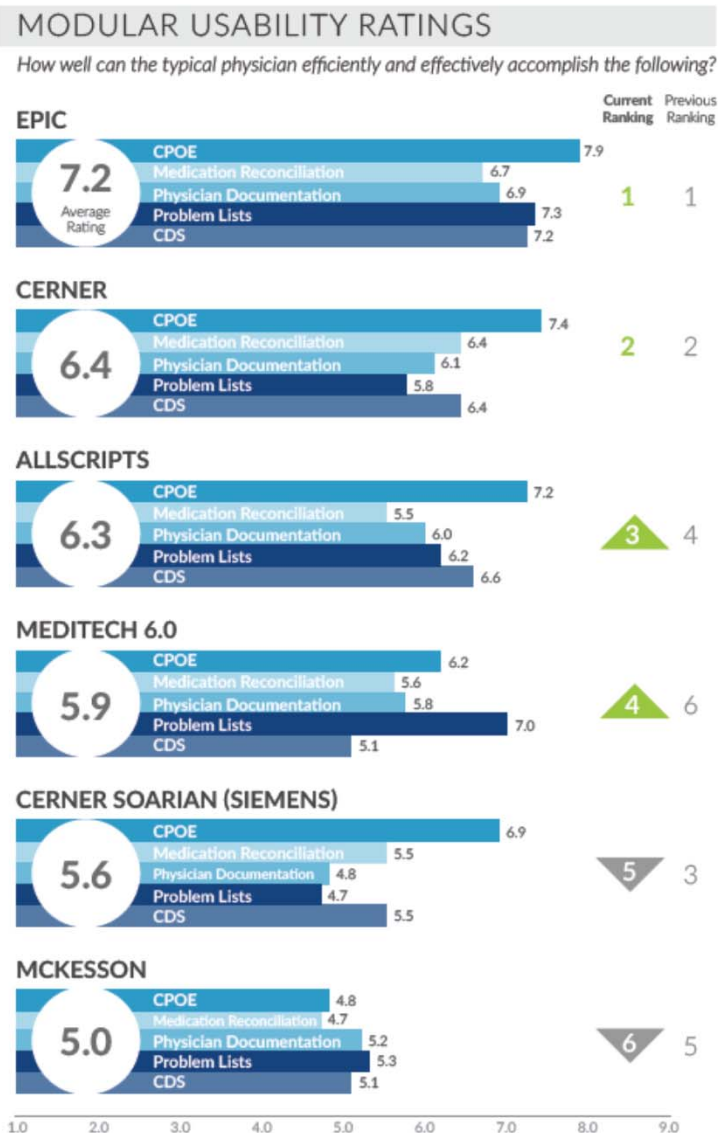
KEY ASPECTS OF USABILITY

Overall physician productivity and effectiveness



MOVERS AND SHAKERS

- **Meditech jumped two spots.** v6x customers reported significant improvement to several modules. Still significantly behind the leaders.
- **Soarian not getting focus.** Customers reported development had slowed before the sale.
- **Paragon drops to last.** Customers are eagerly awaiting v13 which targets physician usability..



INTEROPERABILITY

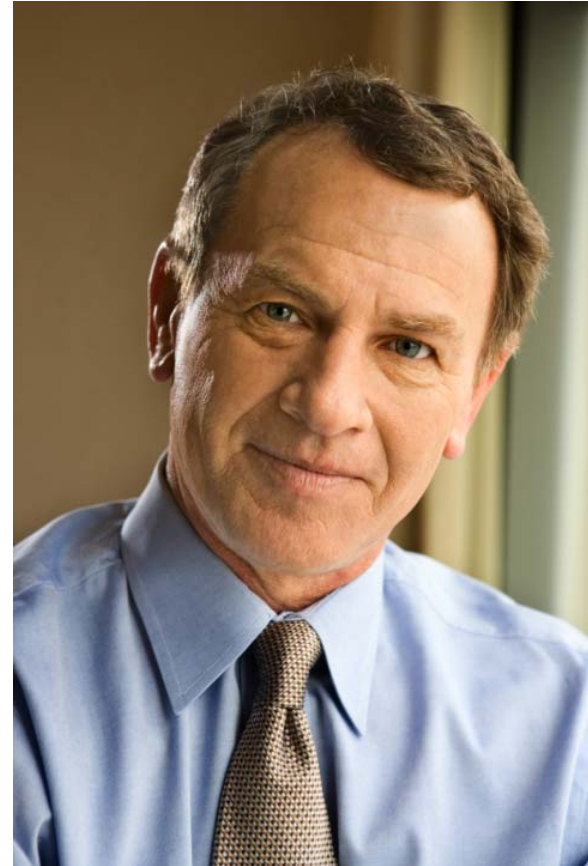


Interoperability

A RECENT PERSPECTIVE

“There is no such thing as interoperability. There is only expense, labor, and determination.”

- CIO



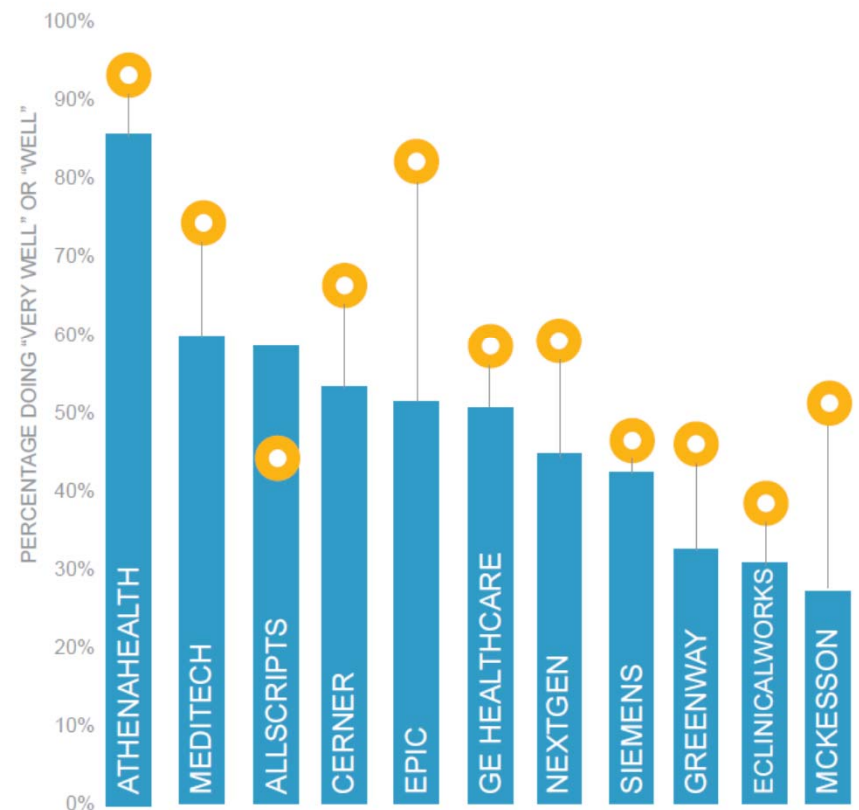
2014 INTEROPERABILITY REPORT FINDINGS

Inter-Vendor cooperation a major delay to interoperability.

INTER-VENDOR COOPERATION

How well do vendors cooperate with other vendors?

■ Cooperation with Other Vendors ● Overall Contribution to Provider Success



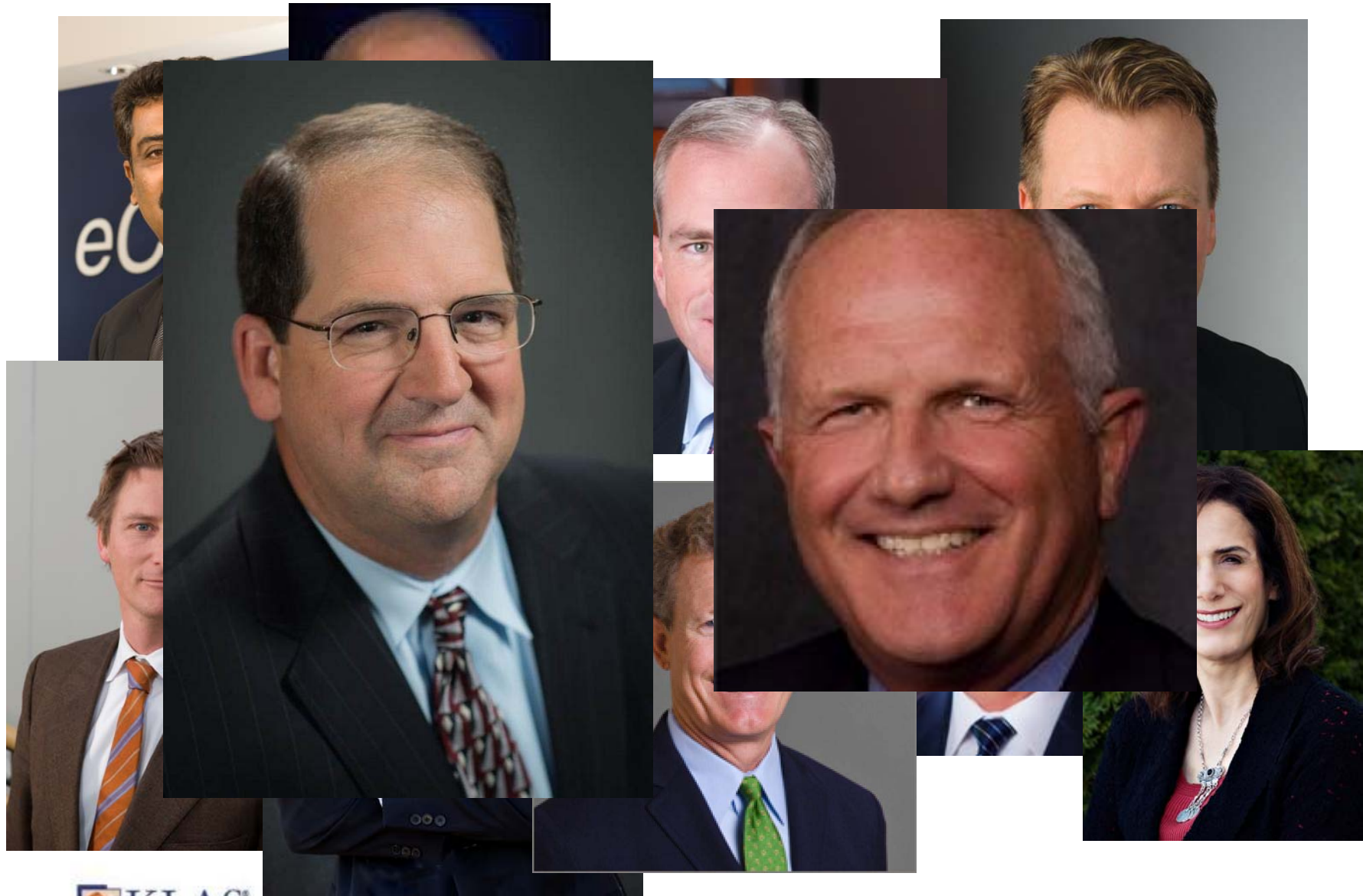
KLAS – CHIME

2015 INTEROPERABILITY STUDY

- KLAS – CHIME partnering
- More in depth
- IT and Medical Leadership voice
- Culminate in Key Stone Summit



LET YOUR VOICE BE HEARD



DOD

Final Three

- Allscripts / HP & CSC
 - Cerner / Leidos
 - Epic / IBM (Impact Advisors)
-
- Decision summer 2015
 - First hospital live EOY 2016-ish



INTERNATIONAL HIT RESEARCH



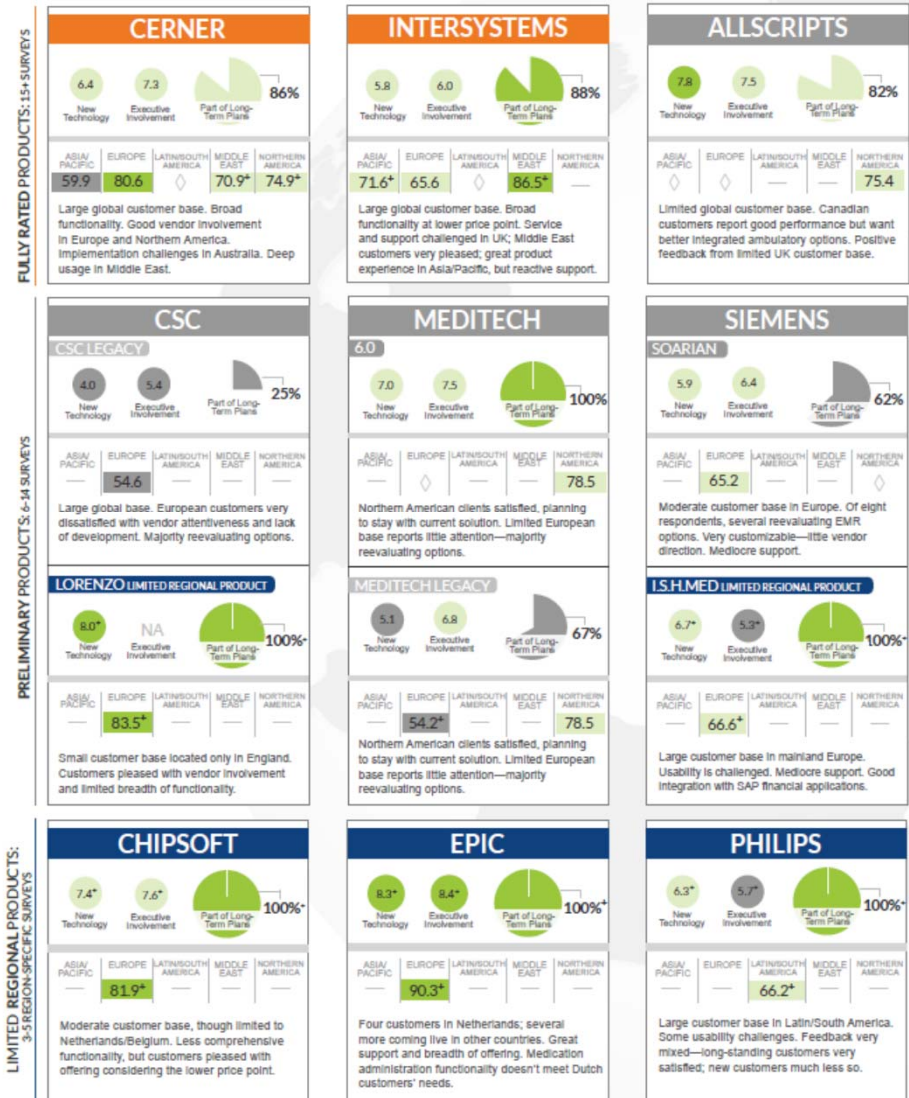
GLOBAL PERSPECTIVE

- Familiar and unfamiliar names.
- Much more diverse setting than US.
- Integration not as large a driver.
- Cost more prominent in the discussion.

A CLOSER LOOK AT THE VENDORS

0 KLAS has surveyed 1-2 live customers in these regions but not enough to show performance
+ Limited regional data (3-5 Respondents)

● ABOVE AVERAGE ● AVERAGE ● BELOW AVERAGE



POPULATION HEALTH

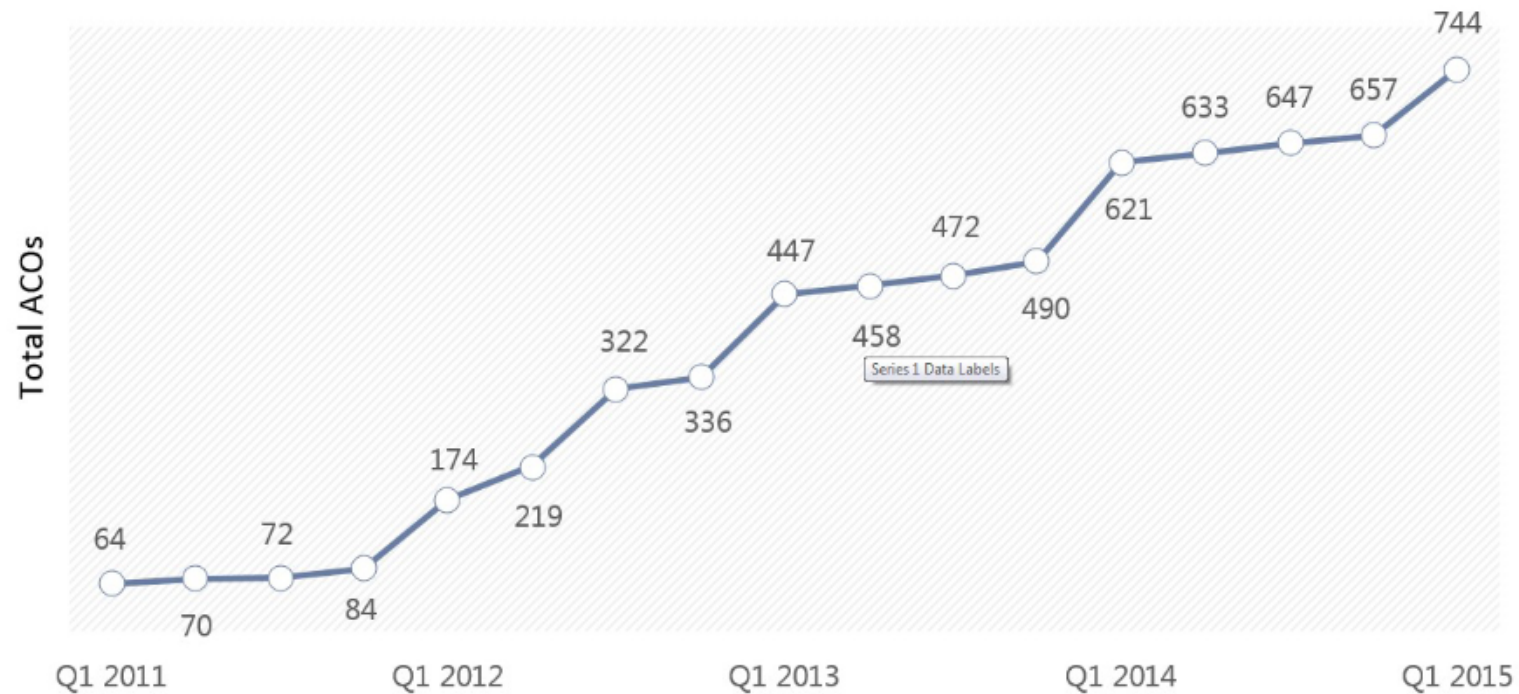


DECISIONS, DECISIONS



ACOS CONTINUE TO GROW

Figure 1. Total Public and Private Accountable Care Organizations, 2011 to January 2015



Source: Leavitt Partners Center for Accountable Care Intelligence

VENDORS CONTINUE TO FLOOD THE MARKET

112 providers

mentioned **77 solutions**

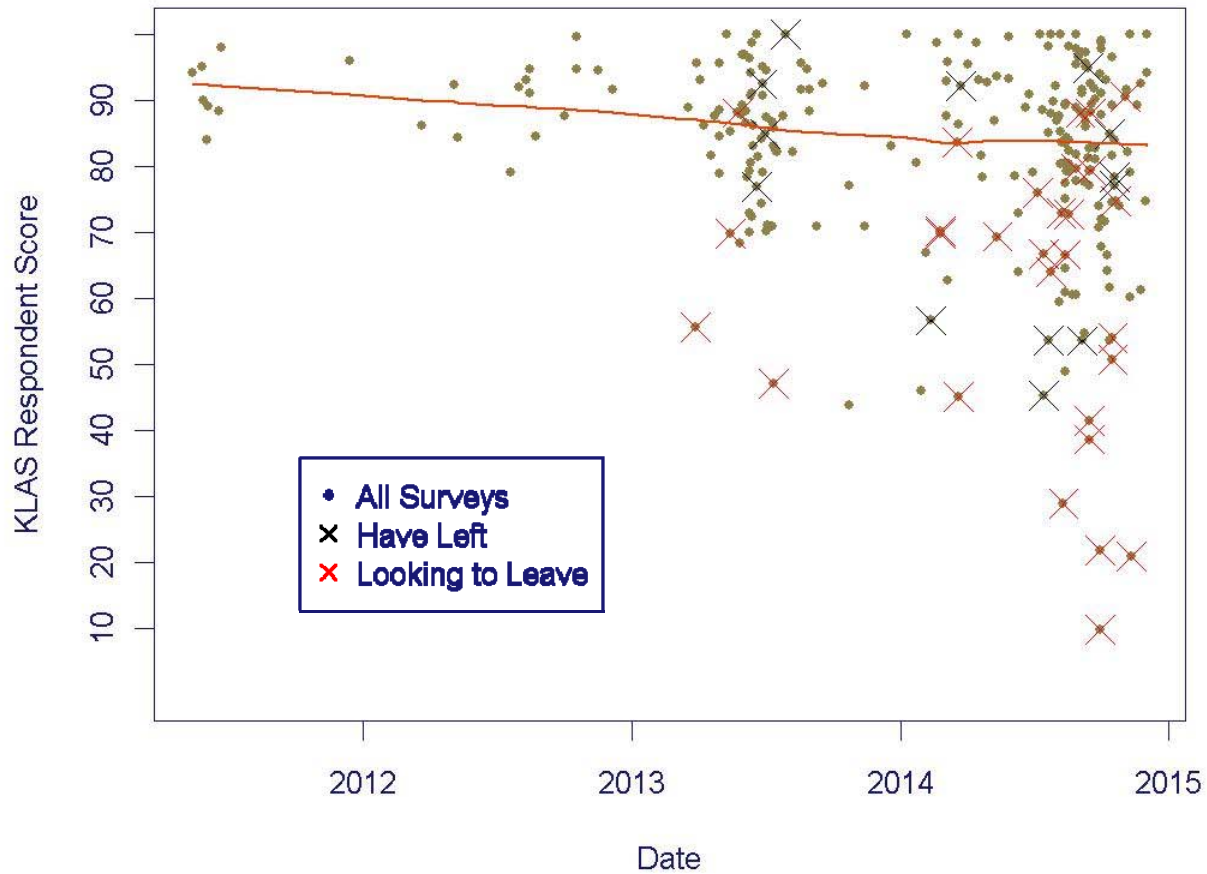
currently in use.

*That is up from **53 a year ago.**



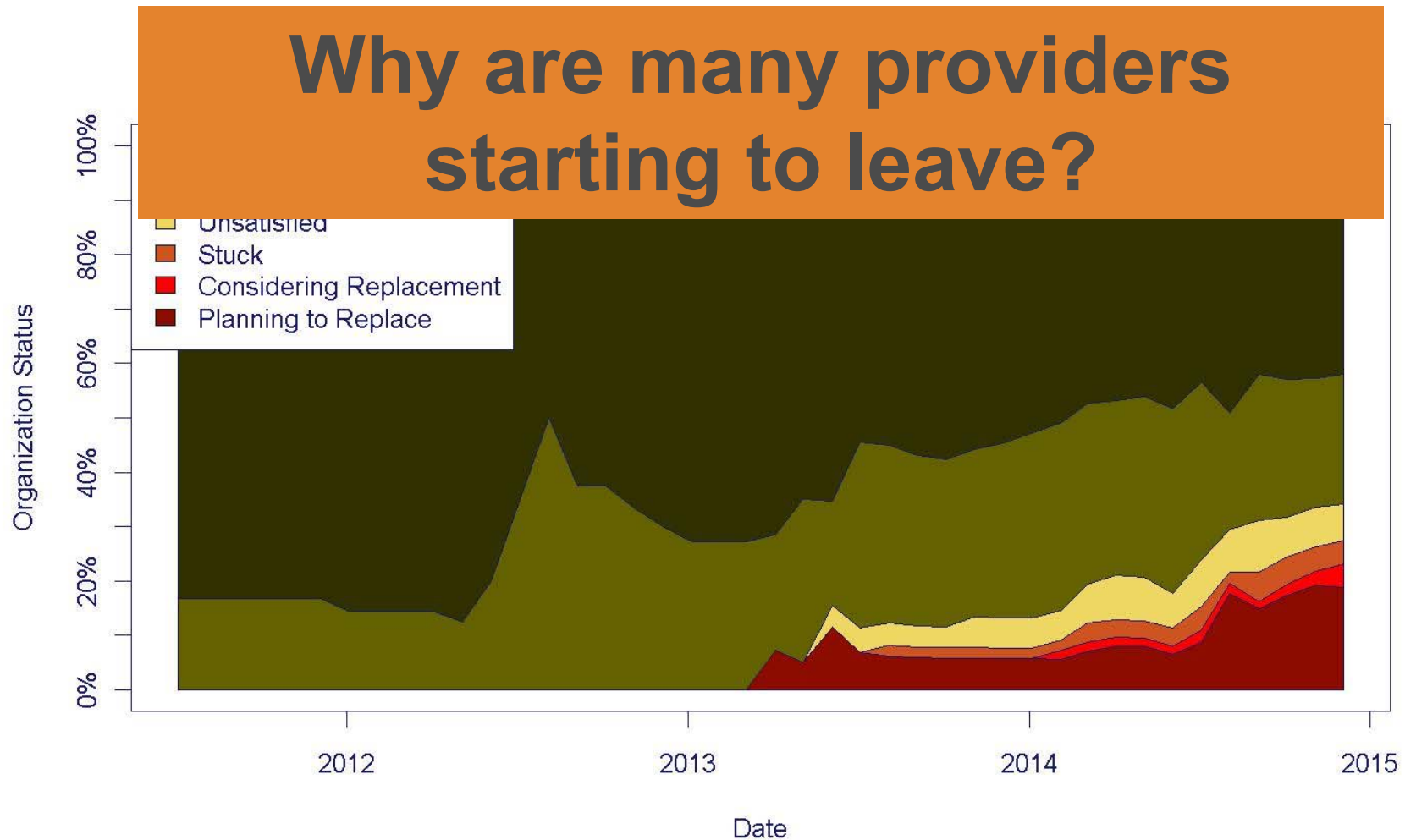
REPLACEMENT VULNERABILITY

Population Health



ORGANIZATION STATUS TREND

Population Health



WHY ARE PROVIDERS LEAVING CURRENT PRODUCT

“I would like to be able to find something **cheaper**.”

“Our long-term goal is have a product that is **integrated** with the EHR”

“I think we realized that we would need one vendor for the back end and one vendor for the front end, meaning **one vendor to do our data strategy and one vendor to really focus on the population health** and population management, assuming data was flowing into the second system.”

“It is still **not exactly** where we want.”

“They **don't even know** what population health management is.”

“**but the problem is that we don't know what we are looking for yet**. We are very reluctant to move toward any one product or vendor in this space because it is hard to put a finger on what it is we are trying to solve.”

“I feel like we are only able to deliver **very baseline phases of our initial road map**. I think we are way behind where we should be. We brought the product live over a year and a half ago, and we have made very minimal advances from the original dashboard tools.”

“Our **EHR software is quickly catching up**. I don't think there is any need to try to adapt to a third-party vendor, because our main EHR is going to provide us with what we need.”

ONE REASON

Stop Gap Till EMR Is Ready



-CMO

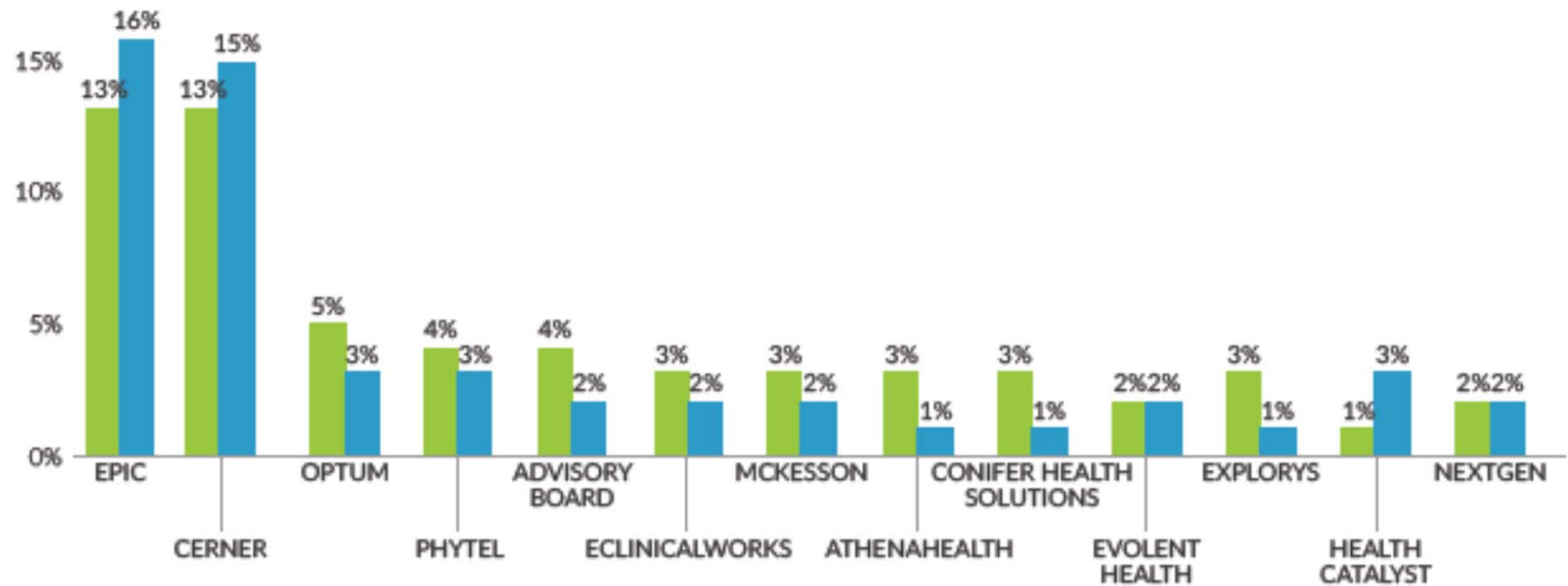
When we selected Crimson, it was only as a stop gap for Epic. We felt in 2013 that Epic didn't yet have all the tools we needed to do population management. They were first introducing their data warehouse, and they were discussing what their analytics might be able to do, and we felt there was a lot of functionality missing. At the time of our decision, our guess was that in a three-to-five-year time frame we would replace Crimson with Epic. I think some of the Crimson functionality might be able to reside in Epic, but when it comes to some of the data analysis and the global views, I wouldn't be surprised if part of Crimson stays. At least for now and the short term, I think Crimson will excel. I don't know exactly when they will be knocked off the pedestal.

CERNER AND EPIC HAVE MOST MINDSHARE

FUTURE PLANS

What vendors are you considering for population health management?

20% ● Risk Management ● Care Management



HOW ***NOT*** TO DO POPULATION HEALTH

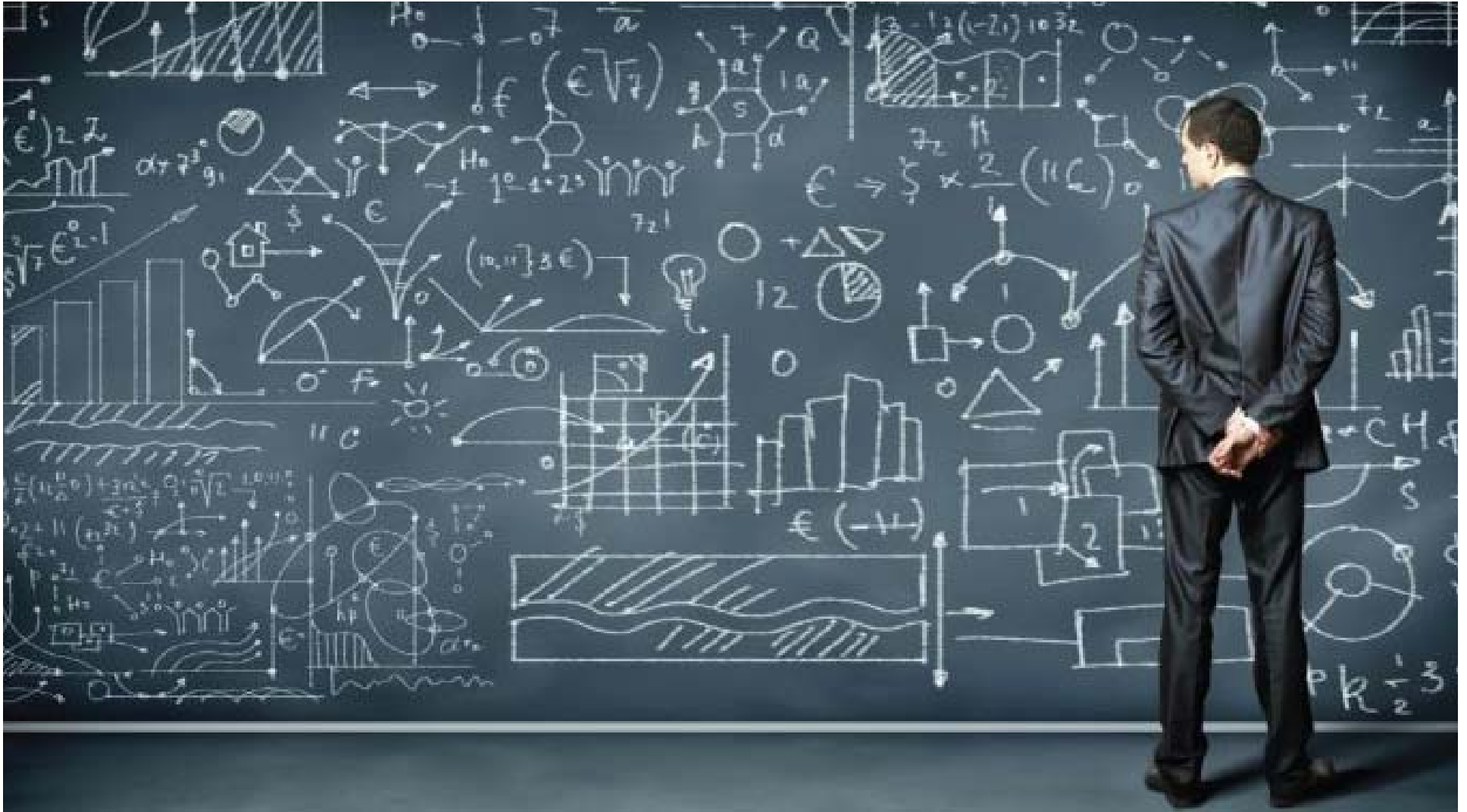


“Humana sent me a chocolate bar as an apology for lousy service.

I am diabetic.

They know this.”

BI / ANALYTICS



FINDING THE NEEDLE VS SUPERSIZING THE HAYSTACK

I would say in the era of big data, **there is too often a focus on making the haystack bigger and not the needle.**

What we really need is tools that not only make the needle bigger but also show us exactly where it is in the haystack. All of these analytics tools have to become better at **elevating the important information** rather than just elevating all of the information.”

-Chief Informatics Officer

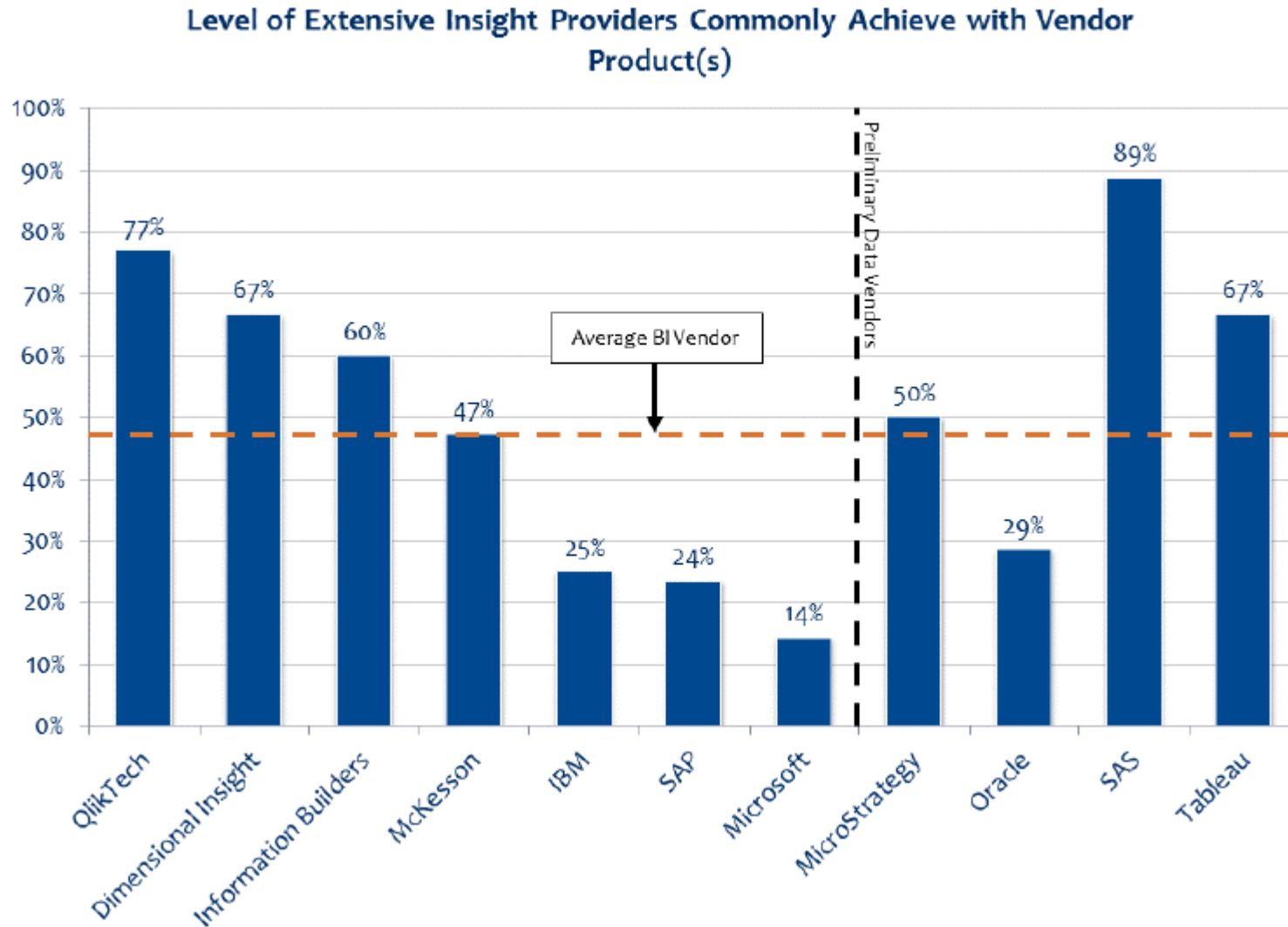


HEALTHCARE BI: THE 2X/3X FACTOR

- What we are starting to advise—even before discussing vendors. Providers are reporting to us that:

Good Tools with Great Service
often produce better results than
**Great Tools with Mediocre
Service**

DEC 2013: EXTENSIVE INSIGHT BY BI VENDOR



CHANGE IN THE AIR



Previously, thought concentrated on

- Who has the most capable products? (i.e., most “horsepower”)

Currently, thought is concentrated on

- Who understands healthcare?
- Who can best help me?

LOOKING FOR A LEADER IN BI

- “There is not a strong, overall market leader at the moment. Everyone fills a niche.”
- “I don’t know that I would say there is a leader in BI. I think the leaders are still emerging.”
- “I don't think there is anybody out there in the market today who should just keep doing what they are doing today.”
- “I think it is a mixed bag for us right now. There is not a clear leader that I can see.”
- “Until a single vendor can meet all needs, we will continue to see competition and a lot of diversity in tools.”

Questions