

TALKING POINTS

December 1, 2015

HIGH-LEVEL SUMMARY

UMass Memorial Health Care is pursuing a 2020 vision to become the best academic health system in America. Our providers and staff selected Epic as the best electronic health record (EHR) system to enable this quest.

EPIC DESIGN PARAMETERS

The Epic Executive Steering Committee is responsible for determining the 47 Epic Design Parameters (EDPs) that will guide the nearly 380 Collaborative Design Sessions. The following EDPs were recently approved:

- ➡ EDP10 UMMHC will support all quality
 and regulatory requirements needed to meet
 Meaningful Use, Core Measures and other
 regulatory needs across all UMMHC entities
- **DP12** UMMHC will achieve a minimum requirement of 90% Computerized Physician Order Entry (as defined by CMS* and HIMMS Analytics** Stage 7) within one month of go-live
- **EDP13** UMMHC will leverage, where possible, Epic's documentation tools
- EDP14 UMMHC will exchange patient information with non-Epic healthcare organizations using Care Everywhere and Epic's personal health record system, Lucy
- ➡ EDP15 UMMHC direct care providers will be required to promote Epic's MyChart patient portal to their patients
- EDP16 UMMHC will establish and require barcode scanning policies for supplies (in certain departments), medications, breast milk and blood
- EDP17 UMMHC will establish a systemwide clinical practice governance structure that includes all UMMHC entities
- EDP18 UMMHC will allow non-provider clinicians to document by exception. This EDP will be evaluated for providers in the near future.

- **EDP19** UMMHC will establish an organizational structure for validating, maintaining and updating all clinical content at least every two years
- EDP20 Ownership and maintenance of patient-reported history and problem list will be the responsibility of UMMHC licensed independent providers
- EDP21 UMMHC will establish an interdisciplinary plan of care model
- EDP22 UMMHC will establish enterprisewide policies for computerized provider order entry (CPOE), protocol orders and standing orders
- EDP23 UMMHC will integrate patient monitoring devices with Epic in critical care areas
- EDP24 UMMHC will establish an integrated workgroup to define a new, Epic-centered legal medical record
- EDP25 UMMHC licensed independent providers will sign notes and orders, co-sign messages and authenticate transcription results within the Epic In Basket
- EDP26 UMMHC outpatient licensed independent providers will review their ordered results electronically in their Epic In Basket
- EDP27 UMMHC will develop an overall business intelligence strategy for non-Epic data that includes the Epic Star Data Warehouse

- EDP28 UMMHC will have electronic signature technology to allow for more paperless patient and staff experiences
- EDP29 UMMHC will develop a strategy with the UMass School of Medicine to use Epic for teaching and research purposes
- EDP30 MyChart will be turned on with all core features enabled and limited where necessary
- EDP31 UMMHC will require scheduling of certain services/departments for inpatients
- **EDP32** UMMHC will pilot the Welcome Patient Kiosk as part of go-live
- **EDP33** UMMHC will use individual billing instead of family billing
- **EDP35** UMMHC will pursue a central patient access center as the ideal future state. A plan will be created and approved regarding the timing of this change.
- **EDP36** − See Note section below
- EDP37 UMMHC will implement automated eligibility coverage, address verification and appointment confirmation queries

^{*} Centers for Medicare and Medicaid Services

^{**} Healthcare Information and Management Systems Society (HIMSS) Analytics is an industry advisory group that does market research across hospitals and ambulatory practices, to determine an organization's level of adoption and integration of their electronic health record system. There are seven stages, each with increasing capabilities and integration requirements.



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- EDP38 UMMHC will install edit checks in Epic for the Correct Coding Initiative and Local Coverage Determination into the system
- EDP39 UMMHC clinical staff will be accountable for their revenue and responsible for their team's capture and reconciliation of charges at the time services are performed
- EDP40 UMMHC will determine and build payor contract rates into Epic
- EDP41 UMMHC will reduce the outsourcing of revenue cycle processes, where feasible
- ► EDP43 UMMHC will implement a single patient statement for all UMMHC entities (e.g., hospitals, professional billing and home health/hospice)
- EDP44 UMMHC will establish the scope for provider-based billing according to current state

- EDP45 UMMHC will have a single consolidated charge master across all entities
- **EDP46** UMMHC will not have separate access for managing confidential accounts receivable information
- EDP47 UMMHC pricing methodology will be updated to reflect future-state charging workflows in Epic

Note:

- **EDP4** three outstanding decisions remain
- **EDP8** regarding customer relationship management, is being evaluated
- EDP11 regarding Epic and legacy data being in separate data warehouses for future analytics, is being evaluated
- EDP18 regarding providers documenting by exception, is being evaluated
- EDP36 Targeted Use of Financial Case Management, is no longer necessary, given that the Tapestry module is out of scope. This does not apply to Resolute Hospital or Professional Billing.

COMING UP

DECEMBER

- Current-State Assessments –
 Site Visits December 14-18
- Epic Project Kick-Off on December 3

JANUARY

- Collaborative Design Sessions, January 12-15
- Epic Project Team achieve certifications

FEBRUARY

 Collaborative Design Sessions, February 9-12

EPIC PROJECT MILESTONES 10/01/17 Transition to Support & Optimization 07/01/17 12/15/16 Go-Live #1 UMMHC 08/31/16 Content Med Center, Med 01/01/16 Design & Build Group, Clinton, Configuration Specific Planning Phase Phase Done/ Specific Marlborough, Medical Complete Date TBD Done/Start Start Testing 03/31/17 Date TBD School Clinical Data Go-Live #3 Design & Build Go-Live #2 Testing 12/01/16 Repository Interface, Community Phase HealthAlliance Infrastructure Done/Start Academic EHR & Pop Healthlink **Training** Ready Health Modules \mathbf{O} \mathbf{O} JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC JAN FEB MAR APR MAY JUN JUL 2016 2017 2018