

# Leveraging data to increase physician engagement



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**Dann R. Lemerand**  
Director, Healthcare  
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Physician engagement is critical to provider success. Success in a healthcare organization can mean many things, but fundamentally, its underpinnings include coordinated care that aligns patient care for the best value. Ideally, physicians are in agreement with administration about how to achieve the best care path for each patient. In a perfect world, this means physicians refer patients within or to your health system because they know patients will get well coordinated care that focuses on the best outcomes. A Gallup study found engaged physicians average 3 percent more outpatient referrals and 51 percent more inpatient referrals than physicians who were not engaged.<sup>1</sup> The variance accounted for an average difference of \$460,000 in patient revenue per physician per year.<sup>2</sup>

Hospitals are more aware than ever of the vital role physician engagement plays. However, while nearly all providers are using data to improve patient outcomes, few providers are leveraging data to improve physician engagement outcomes.

## Show me the data

Claims data is the foundation of physician engagement analytics. Typically, providers can access internal claims data, but have limited access to external claims data. “Internal data only gives you half the story,” said Dann R. Lemerand, director, Healthcare Industry and Solution Strategy, Infor. Internal claims data provides information about which physicians are currently doing business with a hospital, how much business they are doing, and which of the hospital’s sites or facilities they are using. But in order to identify market-area physicians who are not doing business with the hospital, hospitals need external claims data.

Limited external claims data is available from states that have developed All-Payer Claims Databases (APCDs),<sup>3</sup> as well as from federal sources such as the Medicare Provider Analysis and Review (MEDPAR) files from the Centers for Medicare and Medicaid Services (CMS). Raw data can also be purchased from various vendors. However, integrating claims data files across multiple payers is a technically complex undertaking.<sup>4</sup> “It’s not that hospitals can’t access the data, but it’s a lot of information, and most hospitals don’t have the resources to take millions and millions of rows of claims data and make it actionable,” said Lemerand.

## Turning data into information

Data alone does not equal information. The Data-Information-Knowledge hierarchy posits data must be organized and analyzed to become *information* – and be useable to qualify as *knowledge* (see Figure 1).<sup>5</sup> Furthermore, the data must be complete, correct, current and consistent. The collective processes implemented to ensure the quality of raw data are known as *data hygiene*. “Standardizing and normalizing claims data from a variety of sources is a feat in itself,” said Darrin Lee, senior product manager, Healthcare CRM, Infor. “Companies that provide physician engagement solutions must implement data hygiene processes before analysis can begin.”

After claims data has been cleaned up, it must be reviewed by analysts with expertise in claims data in order to pull out actionable insight. Theoretically, hospitals could hire IT staff to pull market claims data, scrub it and analyze it, or, alternately, impose those duties on existing IT staff. Realistically, however, most hospital IT staff already have their hands full with electronic medical record (EMR) system implementations and support, interoperability initiatives and clinical support responsibilities.

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“Most hospitals are equipped to focus on taking care of patients rather than doing heavy data analysis,” said Elizabeth Meyers, nurse executive, healthcare analytics strategy director, Infor. That’s why many hospitals that leverage data to enhance physician engagement work with partners who specialize in analyzing claims data and who offer physician relationship management (PRM) solutions.

### Actionable knowledge

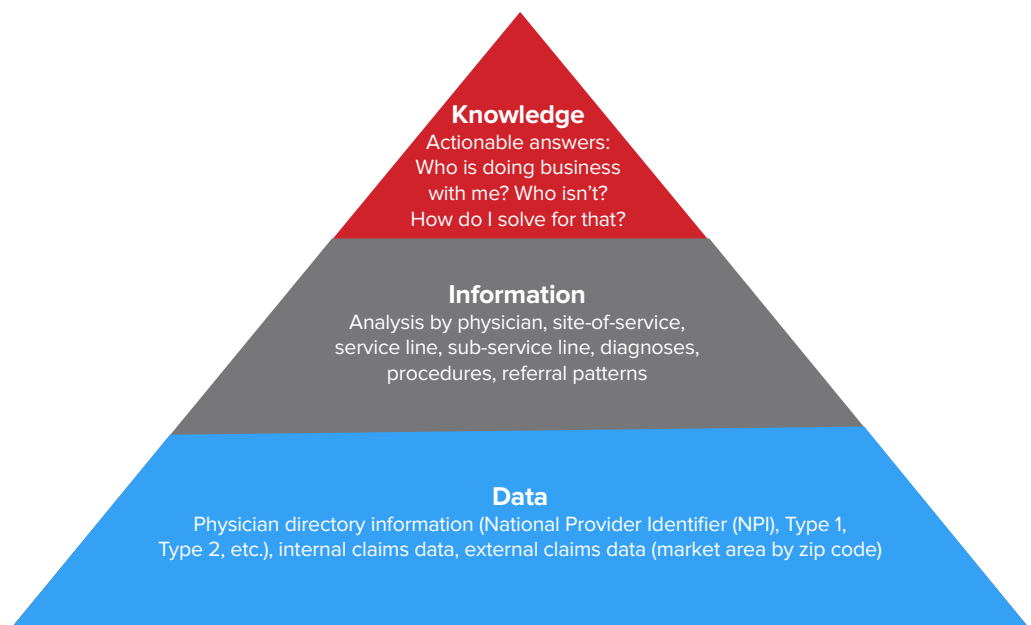
Once the data has been analyzed, hospitals can use the knowledge gained to inform conversations with physicians. “You wouldn’t walk into a physician’s office and say, ‘Hey, why are you sending half your referrals to another hospital?’ But you can use that knowledge to have an informed conversation with that physician and understand what might be preventing him or her from sending more business your way,” said Lee.

The insight gained from claims data can be used to develop meaningful relationships with physicians regardless of their current affiliation status, based upon whether they are doing all of their business, some of their business or none of their current business with the hospital.

Market claims data essentially reveals how physicians in a hospital’s market are “voting with their feet.” It’s then up to the hospital to determine what it is about the hospital’s facilities, technology, policies and procedures or other variables that attract or repel physicians. A comprehensive PRM system will help a hospital track these “pros” and “cons,” so appropriate action can be taken to address physician concerns.

“At the end of the day, physician engagement is about increasing referrals,” said Lemerand. “It’s about making sure the physicians in your market know who you are and what you do, and are happy and willing to do business with you.”

**Figure 1: The Data-Information-Knowledge Hierarchy<sup>6</sup>**



<sup>1</sup> Burger, J., and Giger, A. June 5, 2014. Want to increase hospital revenues? Engage your physicians. *Business Journal*. <http://www.gallup.com/businessjournal/170786/increase-hospital-revenues-engage-physicians.aspx>

<sup>2</sup> Ibid.

<sup>3</sup> See All-Payer Claims Database Council, Interactive State Report Map, <https://www.apcdouncil.org/state/map>

<sup>4</sup> Robert Wood Johnson Foundation. (2014, January). The Basics of All-Payer Claims Databases: A Primer for States. Retrieved from [http://www.rwjf.org/content/dam/farm/reports/issue\\_briefs/2014/rwjf409988](http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2014/rwjf409988)

<sup>5</sup> Chaffey, D. and Wood, S. (2005) *Business information management: Improving performance using information systems*. New York: Financial Times/Prentice Hall.

<sup>6</sup> Figure adapted from Chaffey, D. and Wood, S. (2005) *Business information management: Improving performance using information systems*. New York: Financial Times/Prentice Hall.



### About Infor

Infor Healthcare builds, designs, and delivers science-driven “people” solutions that offer the most flexible and broadest capabilities. We deliver healthcare-specific solutions—available in the cloud—and used by more than 5,000 organizations globally to exchange data across disparate clinical, financial, and operational information systems to transform the integration, planning, tracking, and management of a healthcare organization’s vital resources—people, supplies, clinical data, and financial assets.