Transforming the healthcare experience by connecting people, information, and processes at the point of need

Today’s healthcare market applies different pressures to payers and providers. Payers face intense competition—driven by consumers who are demanding more flexible products, increased transparency, and better service. To survive and succeed, payers find themselves forced to adopt new business models. The Health 2.0 wave is cresting—and with it come expectations for participatory healthcare enabled by information, technology, and community.

Providers, on the other hand, serve an aging population with rising care expectations. These challenges exist against a backdrop of a shrinking supply of nurses and physicians. At the same time, consumers, payers, and employers demand efficient cost management and better outcomes.

For both payers and providers, healthcare remains highly regulated. The Health Insurance Portability and Accountability Act (HIPAA) already makes protected health information (PHI) subject to strict privacy and security rules. Additional regulation is likely due to the recently passed Patient Protection and Affordable Care Act.

Information management can be a tremendous ally in efforts to cope with these challenges. But unfortunately, healthcare organizations often find that their information systems hinder rather than help those efforts. The volume and variety of healthcare information is staggering.

ESSENTIALS

• Optimize decision making with a 360-degree view of patient or member information
• Lower risk and liability with automatic compliance for The Joint Commission, HIPAA, and applicable international regulations
• Improve cash flow and reduce time to revenue for providers and payers
• Improve collaboration and communications between healthcare stakeholders around the patient, member, supplier, or partner
• Integrate seamlessly with hospital information systems (HIS) and other line-of-business systems
Much of it resides in paper documents. Various electronic systems—rarely integrated—also house many gigabytes of e-mail, faxes, records, diagnostic images, video, and audio. All of this content is necessary for day-to-day operations—not just clinical but legal, finance and accounting, customer service, human resources, and facility safety and maintenance.

Information should make the healthcare organization more informed, more responsive, more adaptable, and more efficient—in short, better. But the people and systems that need to use this information often cannot easily access or share it. Manual processes hamper their efforts to perform routine tasks efficiently. Little or no integration exists between activities that require human intervention and those that are automated—or should be. These barriers combine to increase errors, degrade performance, and rob organizations of the capacity to make the right decision quickly.

**INFORMATION INTELLIGENCE: CONNECT INFORMATION WITH PEOPLE AND PROCESSES**

EMC® Information Intelligence helps healthcare organizations become more agile, responsive, and competitive by enabling them to get the most out of their information. It ensures that information is accessible and properly managed, stored, and secure. When intelligence is built into the information infrastructure, the right information is always available when and where it’s needed. With information intelligence, organizations can make the right decisions while reducing cost and risk.

With solutions developed by EMC’s world-class partners, the opportunities to leverage information intelligence throughout a healthcare organization are virtually unlimited. Information intelligence can exploit the natural relationships between content and processes that exist in areas such as hospital admissions, patient care delivery, benefits administration, claims processing, and customer service.

**INTELLIGENT ENTERPRISE CAPTURE: TRANSFORM PAPER FROM LIABILITY TO BUSINESS ADVANTAGE**

From processing incoming orders via fax and matching invoices in accounts payable to filing medical records or claims from out-of-network payers or providers—intelligent enterprise capture can automate many of the manual, time-consuming tasks that commonly plague the administrative processes of healthcare organizations.

Intelligent enterprise capture transforms paper documents into application-ready information. It connects scanners, fax machines, and multi-functional peripherals to a central content repository, where, regardless of source or format, data can be captured, indexed, and delivered to the business systems that require it. This integration eliminates the rekeying of data from paper documents—not only speeding processing but also reducing errors. Intelligent enterprise capture also aggregates information, making it available to reporting tools that support faster, more informed decision making.

For example, intelligent enterprise capture can streamline the hospital admissions process, automatically capturing patient information from ID and insurance cards. By making information accessible electronically, the same technology enables hospitals to save over $300 thousand annually through remote coding of patient services for billing.

For payers, intelligent capture benefits the new member enrollment and customer service processes—routing information from hard copy and electronic forms directly to member service representatives. Better service can deliver measurable bottom line improvements in an industry where average attrition is 20 to 25 percent annually. Intelligent capture can also reduce the volume of lost or misfiled documents. Hospitals can easily process hundreds of thousands of paper admissions documents annually—losing or misfiling about one out of every 20.
INTELLIGENT INFORMATION ACCESS: LOCATE, SHARE, AND MANAGE ALL TYPES OF INFORMATION

Once documents are digitized and stored in a single repository, critical data can be quickly accessed and intelligently processed. Through federation, intelligent access technologies can use and manage data from multiple applications while the data remains under the control of the application that created it.

Intelligent access benefits all healthcare workers. It maximizes the accessibility, reuse, and control of information wherever it exists. One prominent New England hospital used a central repository to provide a single point of access to information siloed in more than 25 hospital information systems, saving nursing unit coordinators thousands of hours annually—a substantial competitive advantage.

To control access to information and protect its confidentiality, intelligent information access includes information rights management (IRM) technology, which enables repository content to be controlled, secured, and tracked wherever it resides—behind or beyond the firewall. Health payers and providers can use IRM for the secure exchange of protected health information (PHI). One health insurer located in the southern U.S. used IRM to protect PHI distributed via e-mail, simultaneously complying with HIPAA privacy regulations and reducing the cost of paper distribution—without imposing any special requirements on its members.

INTELLIGENT CASE MANAGEMENT: EFFECTIVE CASE-BASED SOLUTIONS WITHOUT COSTLY CUSTOM DEVELOPMENT

Intelligent case management technology improves performance, eliminates errors, and puts the right information in the hands of decision makers. It can automate many manual processes and coordinate the interface between automated processes and those that require human intervention.

Using prebuilt templates and components, intelligent case management provides a rich solutions infrastructure, optimized to deliver dynamic, case-based applications through configuration not expensive customization. Electronic case files eliminate the inefficiencies of paper and aggregate any type of content relevant to a case—not only documents but also audio and video files, medical images, and discussion threads.

Intelligent case management capabilities can be configured into reliable applications serving any healthcare process or activity. The configuration platform seamlessly integrates technologies, such as content management, business process management (BPM), records management, collaboration, intelligent capture, customer communications, and comprehensive reporting.

Solutions configured with intelligent case management can streamline and automate inefficient processes while providing the foundation to manage the entire healthcare information lifecycle. Process modeling and simulation identify bottlenecks before processes are introduced to supporting systems and solve inefficiencies that make it difficult for departments to boost efficiency and control costs. Intelligent case management can:

- Increase claims processing productivity by 60 percent while reducing errors by 75 percent and lowering costs by 30 percent
- Manage the interface between manual and automated processes that coordinates compliance with HIPAA and The Joint Commission
- Improve process visibility with consolidated dashboards that optimize decision making and support regulatory reporting for administrators, clinicians, and department heads
- Support clinical, financial, and operational processes with robust, configurable workflows and business rules
INTELLIGENT CUSTOMER COMMUNICATIONS: PRODUCE WELL-DESIGNED, HIGHLY PERSONALIZED MULTICHANNEL COMMUNICATIONS

Intelligent customer communications technology delivers highly personalized and engaging communications that can build loyalty and drive revenue through any channel. It offers sophisticated capabilities that can be integrated with self-service web portals and kiosks to tailor communications to the delivery requirements of the recipient: print, web, e-mail, or mobile device.

These capabilities can automatically generate routine patient correspondence or welcome kits for new health plan members. They can trigger alerts when a physician is changing facilities or when coverage terms and conditions change. And they can automate notification of status changes when a member has reached a reimbursement limit or a patient is moving from a specialist to a general practitioner. Using this technology, one health insurer improved the quality of its benefits handbook by streamlining and accelerating the publishing process. The insurer saved $2.4 million in paper, printing, and postage expenses.

Besides improving the patient-provider or payer-member relationship, customer communications management technology speeds the publication of critical documents, increases accuracy, reduces cost, and enforces a rigorous approval process that supports compliance.

INTELLIGENT INFORMATION GOVERNANCE: LOWER COSTS, REDUCE RISK, AND ENSURE COMPLIANCE

No information management solution is complete without the ability to meet long-term storage, retention, and archiving needs. Intelligent information governance enables healthcare organizations to meet these needs and manage growing volumes of information. It lowers costs, reduces risk, and automates compliance with legal and regulatory standards such as The Joint Commission, Stark Law provisions, and HIPAA. For instance, information intelligence can ensure that contract terms, conditions, and renewal dates are observed. Lapsed contracts can be very costly as one Washington state hospital discovered. Stark Law violations made it potentially subject to $850 thousand in penalties.1

Information intelligence includes technologies that discover information wherever it resides, categorize it, and enforce appropriate polices to govern storage, retention, disposition, and archiving. Information with operational value remains quickly accessible and e-discovery ceases to be a process that throws entire organizations into chaos.

EMC INFORMATION INTELLIGENCE: PAVING THE WAY FOR INTELLIGENT HEALTHCARE

EMC Information Intelligence measurably enhances clinical, financial, and operational systems for all healthcare organizations, making them more agile, responsive, and competitive.

Information intelligence helps healthcare payers:

• Respond to customer inquiries in less than two minutes
• Reduce claims processing time by 50 percent and average processing cost by 40 percent
• Support compliance with HIPAA privacy provisions without impacting members or partners
• Increase enrollment volume by as much 20 percent without additional IT resources
• Eliminate the cost of redundant systems by over 60 percent

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For healthcare providers, information intelligence can:

- Cut The Joint Commission approval and accreditation process by 80 percent
- Deliver a consolidated view of patient information to optimize care
- Recapture thousands of hours annually for nursing unit coordinators
- Save more than $320 thousand per year with remote inpatient coding
- Reduce liability and lower insurance rates with automated reporting for disease management and adverse events
- Update policies, procedures, and treatment protocols in minutes rather than hours or days

**ABOUT EMC**

EMC Corporation (NYSE: EMC) is the world's leading developer and provider of information infrastructure technology and solutions that enable healthcare organizations of all sizes to transform the way they compete and create value from their information. Information about EMC products and services can be found at www.EMC.com.