![DrFirst logo] **DrFirst**
Unite the **Healthiverse**®

Put Your Data to Work:
3 Strategies for EHR Vendors to Build a Data-Driven Business

Give customers everything they need to make informed decisions and launch value-based care and population health initiatives.

www.drfirst.com

Data Fuels Decision-Making

Two decades ago, one of the biggest challenges in healthcare was a lack of patient data. Today, electronic health record (EHR) systems have become ubiquitous and healthcare organizations are gathering more patient information than ever. Surely, providers now have all the data they need for clinical decision-making, right?

Unfortunately, as EHR vendors know, it's not quite that simple.

While the transition to electronic prescribing went a long way toward gathering prescription history in the patient record, e-prescribing alone is no longer enough. In today's data-driven environment, how can EHR and other health IT vendors put their data to work to inform providers at the point of care, support positive patient outcomes, and succeed in a fiercely competitive market?

These three strategies give you a good start.

3 STRATEGIES FOR EHR VENDORS

Strategy 1: Repair Fractured Medication History Data

Strategy 2: Tap Into Data That Engages Patients and Promotes Adherence

Strategy 3: Streamline Data Migration Between Disparate Systems

Strategy 1: Repair Fractured Medication History Data

Data-sharing is required when patients transition from one provider to another. While the clinical meaning is clear to the sending system, that meaning is often lost when it reaches the receiving system. When data loses its structure because the receiving system can't translate it properly, someone must enter that data manually. The process is time-consuming and prone to errors.

Patient medication history is one area where incorrect and incomplete data can have a negative effect on patient outcomes. Fractured data sources, inconsistent terminology, and unnecessary manual entry all characterize the inefficient process of medication reconciliation.

By improving the quality of patient medication data and making it usable within your EHR's native workflows, your customers have a valuable resource to support value-based care and population health initiatives. Using clinical and statistical context, DrFirst's patented artificial intelligence (AI) cleans and structures medication, allergy, and immunization data into the nomenclature of the receiving system. This removes the data transcription effort for providers by codifying information into discrete data elements that a receiver's system can understand, without manual intervention.

One DrFirst customer optimized and migrated 88.6% of medications and prescription instructions into a consolidated EHR system and saved five to seven minutes per patient record compared to a manual process. That was the subject of a conversation this year at HIMSS between Colin Hung of Healthcare IT Today and Zach Fox, President of Partner Solutions at DrFirst.

Watch Video: Closing Gaps Between Information and People

Strategy 2: Tap Into Data That Engages Patients and Promotes Adherence

Common barriers can prevent patients from taking their medications as directed. Patients may forget to pick up prescriptions, or they get confused about the instructions from their last office visit, or they can't afford a medication.

"Sticker shock continues to be a barrier to medication adherence, and there is simply no reason for it," said Colin Banas, M.D., M.H.A., chief medical officer for DrFirst. According to a study by the nonprofit West Health Policy Center and Xcenda, cost-related non-adherence could become a leading cause of death in the U.S. by 2030, surpassing diabetes, influenza, pneumonia, and kidney disease.

To better understand the issue, DrFirst surveyed 200 American consumers about their experiences with prescriptions and price transparency. The survey found that:

- Nearly half of consumers (43%) say their doctors did not discuss prescription costs within the last 12 months

- Half (49.5%) say they have abandoned a prescription at the pharmacy within the past few years because it was too expensive

- Almost a quarter (24%) say they've stopped prescribed therapy because they could no longer afford it

- Roughly one in every 10 consumers (11%) reports taking less than the prescribed amount to save money

In addition, patients say they appreciate texts that share cost and savings information to help avoid surprises. Participants rank getting information about their out-of-pocket costs as most valuable (41%), followed by general information about the medication (23%), digital coupons that reduce costs (18.5%), and the cost of a prescription if they do not use insurance (18%).

This non-adherence—and the preventable readmissions it can cause—is estimated to cost the U.S. healthcare system a whopping $290 billion per year, according to the 2019 Annual Review of Pharmacology and Toxicology. The financial cost plus the detrimental impact on patients' health makes it vital to find innovative ways to reinforce provider recommendations after the patient leaves the exam room. Also vital: doing so in a way that isn't a burden on providers or their staff.

"Medication adherence is a shared responsibility between healthcare providers and patients," said Dr. Banas. With RxInformSM integrated in DrFirst's e-prescribing and medication management platform or added to your existing e-prescribing system with a few simple APIs, providers can encourage compliance with treatment plans. When a provider prescribes a new medication, RxInform triggers a secure message with a link to pharmacy information, educational material about the prescription, and an option to schedule a pickup reminder. This brings the patient back into the prescribing process and makes them a stakeholder in managing their own health, which isn't part of traditional e-prescribing applications.

[See How Better-Informed Physicians DeliverSuperior Care to Patients](#)

Strategy 3: Streamline Data Migration Between Disparate Systems

Unstructured, incomplete clinical data is the enemy of value-based care and impedes population health initiatives. In a recent interview, John Lynn of Healthcare IT Today asked a panel of healthcare experts how the challenge of sharing health information across incompatible systems impacts the quality of data and ultimately, the quality of patient care.

The panelists included:

- Colin Banas, M.D., M.H.A., Chief Medical Officer, DrFirst
- Paul Grundy, M.D., M.P.H., Advisor, Grundy Consulting
- Sarah Richardson, CHCIO, Chief Information Officer, Tivity Health

The experts discussed the state of patient data today, how gaps in interoperability impact quality initiatives, and how the healthcare industry can solve lingering data fidelity issues between disparate systems and formats.

Can you share data between systems?

"The fact that we still have fax machines in most clinics and hospitals speaks to the fact that there's a long way to go," said Dr. Banas, while acknowledging that some EHR vendors have made tremendous strides in streamlining the flow of data.

Is managing healthcare data more complicated than rocket science?

"I used to think that healthcare was like rocket science in terms of data," said Dr. Grundy, *"but I now conclude that it's a lot more complicated. Rocket science is relatively easy when compared to managing the care for 100 people with diabetes, all with 100 different personalities and myriad medications."*

Is your data accessible?

"It has to be clean data before you put it into a new system," said Sarah Richardson, pointing out that while the healthcare industry has a wealth of information stored in different places, it needs to be structured and in a usable format so the right people can access it at the right time. *"Otherwise, you are wasting your time and your money,"* she said.

How are you using AI?

According to the panelists, the good news is that the solutions already exist. AI-powered technology such as DrFirst's SmartProcessor℠ delivers complete, clean data that supports the new focus on healthcare rather than sick care. As the industry shifts toward value-based care and scales up population health programs, it's vital for EHR vendors to bring together capable partners who can streamline the exchange of data between disparate systems and make that information usable by providers.

Watch the Panel Discussion on Data Integrity

Partnerships That Put Strategy Before Software

The digital transformation of healthcare is forcing change faster than ever. For EHRs and other health IT vendors, the ever-shifting landscape presents many challenges—and opportunities.

At DrFirst, we believe strategy should always come before software. Fortunately, we are far more than a software company. We are a strategic partner for EHR and health IT vendors, creating relationships based on trust, dialogue, and respect. As a DrFirst partner, you can rely on us to deliver innovative technology, assist with medication management regulations, and free up space on your roadmap for new projects.

In this complex, fiercely competitive market, more than 300 EHR vendors depend on DrFirst to help solve their customers' challenges, accelerate innovation, and comply with new regulations. Leave development and compliance to us, and gain back product and technical resources for strategic initiatives that make your platform a valuable source of trusted data.

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About DrFirst

Since 2000, DrFirst has pioneered healthcare technology solutions and consulting services that securely connect people at touchpoints of care to improve patient outcomes. We create unconventional solutions that solve care collaboration, medication management, price transparency, and adherence challenges faced in healthcare. We unite the Healthiverse—the interconnected healthcare universe—by providing our clients with real-time access to the information they need, exactly when and how they need it, so patients get the best care possible. DrFirst solutions are used by nearly 260,000 prescribers, 71,000 pharmacies and pharmacy systems, 300 EHR, HIT and software partners, and 2,000 hospitals and healthcare systems in the U.S. and Canada.

To learn more, visit **www.DrFirst.com** and follow **@DrFirst**.

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