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Tracking Medical Treatments in Real Time

IBM Business Analytics is not only empowering physicians to rate their performance but also teaching them how to improve it

by [Paul Hyman](#)

How are doctors able to know whether they are doing any good for their patients—or whether they need to make changes in their treatment practices—without auditing the results of their performance?

They can't, says Dr. James Holly, who believes that without business intelligence and auditing capabilities, physicians "can never get better at what they do because they don't know what 'better' is."

Holly is CEO of Southeast Texas Medical Associates (SETMA), a primary, multispecialty healthcare group in Beaumont, Texas, with annual gross revenue of \$28 million. The group employs 29 physicians who treat more than 7,500 patients annually.

Fourteen years ago, Southeast Texas Medical Associates began doing basic analytics using Excel spreadsheets, Holly recalls, "but the process limited significantly what we were able to do." Anytime the group needed to analyze anything that involved its entire electronic health records (EHR) database, the system would practically grind to a halt.

Holly explains, "Our challenge was that we wanted to do real-time analysis of our performance, which would enable each provider to see what they did the day before, compare their performance with their colleagues, and then we intended to publish the results daily on our Web site by each provider's name using 250 quality metrics. I was convinced that would improve everyone's care quality. But, because it took 36 hours to analyze what we wanted to report every 24 hours, it didn't take a rocket scientist to figure out the task was impossible."

Three years ago, Holly charged SETMA's CIO with selecting a CRM product that would meet all the criteria of the group, especially having the capacity and speed to do real-time analytics. Cost, Holly told his CIO, wasn't an issue; the data needed to be "valid and real."

SETMA'S CIO used industry reports and reviews to select IBM Business Analytics and then hired a consulting firm to translate the group's ideas into the software's capabilities.

"We selected [Rochester, N.Y.-based] LPA Systems to build reports to produce the analysis we desired," Holly says. "It took almost a year to complete the project, but it was a big one and we wanted it done right."

The total tab—\$500,000—is a bargain, Holly says, when you consider what IBM Business Analytics has enabled SETMA to do, including gain greater insight into hospital readmissions, explaining why some patients return to hospitals so soon after their discharge. This is particularly important, he adds, citing an October 2010 study by the University of California at San Francisco, which determined that

unplanned hospital readmission within 30 days occurs in nearly one in five Medicare patients in the United States. These readmissions, he says, are not only extremely costly, but they also can put the patient at higher risk of more serious illness and, in some cases, death.

"Through analytics and our ability to examine multiple, complex parameters that influence our patients' care, we have improved our preventable readmission rates in just six months by over 20 percent," Holly reports.

Similarly, a lengthy audit involving about 20 quality metrics that the group does regularly on its diabetes care would take months to complete if done on paper. Using IBM Business Analytics, the process takes exactly 14 seconds.

"Anything you can do in 14 seconds, you can do as often as you want," Holly says. "If you can generate reports that quickly, you can use them more frequently for educational and improvement purposes."

While most businesses would measure the ROI of their CRM investment in terms of dollars and cents, Holly points out that the healthcare industry is different from others: "Our mission, while supported by revenue, is ultimately defined by human experience. Our emphasis is on 'doing good.' And, with analytics, we are able to know 'where we are' and 'how we are doing.' Without that information, we cannot know how to improve."