



# Partners HealthCare System

Helping to Build a High-Value Health Information Exchange at Low Cost

## Challenge

Nine Partners Healthcare System (PHS) members were operating off of nine different asynchronous systems, adding multiple steps and unnecessary time to perform routine transactions. With 14 million real-time transactions and \$6 billion of batch transactions conducted in 2006, the various systems being used for sending and receiving information made this process prone to error and very inefficient, costing PHS valuable time and personnel resources. PHS' strategic initiative for high performance seeks to improve in five key areas:

1. Maximizing the use of new information technology.
2. Increasing patient safety and reducing medical errors.
3. Making high quality performance uniform across the PHS system.
4. Coordinating better care for the sickest and most expensive patients.
5. Improving efficiency in the use of high-cost drugs and radiology tests.

## Solution

IVANS worked with PHS to help them achieve some of these initiatives. IVANS provided the communications network for PHS to conduct all its Medicare claims transactions using a single, secure and stable connection that allowed members to share data electronically. Whereas PHS had been dialing into different modem banks, they now rely on the IVANS connection to support that throughput for faster and more reliable access. Additionally, IVANS provides centralized technical support for PHS so members do not have to work with multiple communications providers.

PHS had been looking to develop a proprietary EDI (electronic document interchange) payments system back in 2003, but decided a regional solution would be more advantageous in healthcare than a stand alone or value-added system. As a result, PHS worked with CareGroup, Tufts and Harvard Pilgrim to create the New England Healthcare EDI Network (NEHEN), which allows healthcare professionals to swap data securely and in compliance



### Customer Need:

Members of PHS were using their own network systems to perform Medicare transactions instead of sharing data electronically. This wasted a significant amount of time re-keying information on patients and was an inefficient and costly way to operate their business.

### IVANS Solution:

IVANS provided the communications network for PHS to share data electronically, perform Medicare claims transactions and receive centralized technical support.

Additionally, more than 75 Partners staff members now have online Medicare access to direct data entry (DDE) across the member hospitals.

### Key Benefits:

- Tremendous financial and productivity savings .
- Better integration of payer response data.
- Optimization of data versus re-keying data so more time is spent leveraging the response data from the payer to reduce claim denials.
- Revenue cycle now analyzed with trending reports, comparing remittances against eligibility detail for further enhancements to the process denials.





with the Health Insurance Portability and Accounting Act (HIPAA). The NEHEN gateway provides the interface to the IVANS dedicated connection to the Medicare Data Communications Network (MDCN) for support of all its Medicare claims transactions. Since PHS was using the NEHEN gateway for DDE, IVANS leveraged that for upfront Medicare eligibility verification as well as the back-end batch process so it could deliver a total solution.

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## Results

The IVANS solution has enabled PHS to enjoy tremendous financial and productivity savings. For example, PHS member, North Shore Medical Center, now saves \$50,000 a year simply by replacing three modems with the IVANS connection, while founding member, Massachusetts General Hospital, eliminated eligibility transaction fees for a savings of \$135,000 per year.

**“By using computerized systems, including electronic medical records, provider order entry and medication administration systems, PHS has made significant progress.”**

– **Patrick J. Brown**  
eCommerce Technical Team Leader  
Partners Healthcare System

On the front-end, the solution has allowed PHS to better integrate payer response data by focusing workflows on “exception processing” instead of compliance checking (making sure each patient is checked). As a result, 7-10% of requests fall into an exception-based work queue and there is an improved plan code assignment.

On the back-end, members of PHS are able to optimize the data versus re-keying in the information so more time can be spent leveraging the response data from the payer to reduce claim denials. The self-pay collections process and reserve modeling have improved, and the revenue cycle can now be analyzed with trending reports (versus transactional reports), comparing remittances against eligibility detail for further enhancements to the process.

## About Partners HealthCare:

Located in Boston, MA, Partners HealthCare System is an integrated health system founded by Brigham and Women’s Hospital and Massachusetts General Hospital in 1994.

In addition to its two academic medical centers, the Partners HealthCare System also includes community hospitals, specialty hospitals, community health centers, a physician network, home health and long-term care services, and other health-related entities.

As a non-profit organization, Partners Healthcare System is one of the nation’s leading biomedical research organizations and a principal teaching affiliate of Harvard Medical School.



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