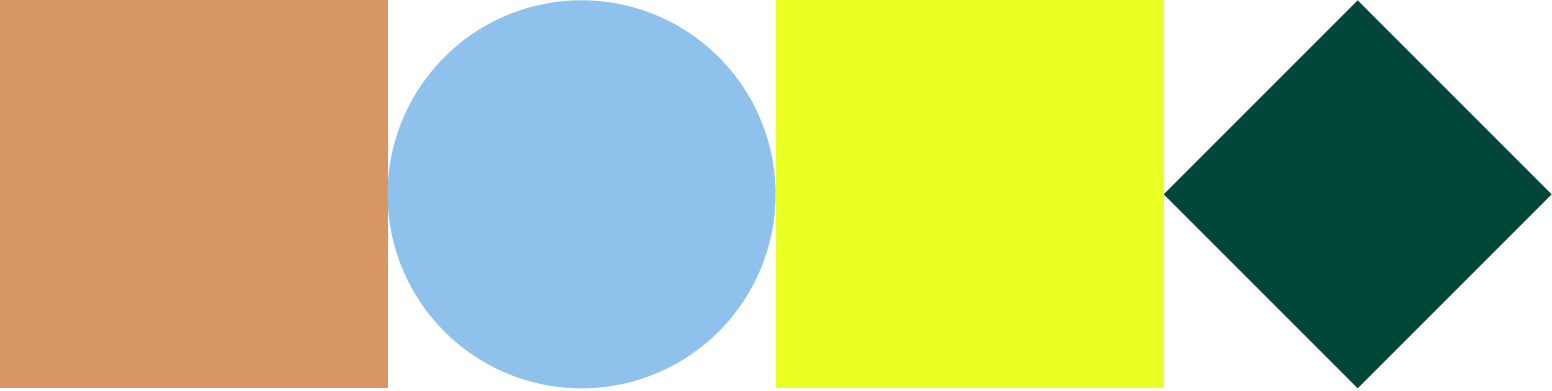




Rising Volumes of Patient Data Demand New Capabilities for Data Management

New research finds that many healthcare organizations are not completely prepared to meet the requirements of the 21st Century Cures Act or handle the associated data influx



There is an imminent crisis looming over the healthcare industry. Organizations face growing challenges managing patient data, which is becoming increasingly voluminous and complex.

Since the implementation of the HITECH Act, more information is being shared between healthcare organizations. Further demonstrating its commitment to the sharing of information and interoperability, the US government has introduced the 21st Century Cures Act. With the commencement of this Act, healthcare organizations expect a significant influx of data and are concerned about their ability to comply with the provisions. Despite significant effort, relatively few organizations have a comprehensive compliance program in place. This significantly limits their ability to comply with the Act and improve their patient-level

data management and matching. Recent disincentive proposals for non-compliance highlight the urgency of putting a solution in place.

Failure to successfully ingest, match, retrieve, and use patient data from a diverse set of sources threatens to negatively impact overall patient care, outcomes, and the organization's ability to survive and thrive.

We interviewed 197 industry executives from hospitals, health systems, and payers in the U.S. They are focused most intently on solving current issues and planning for future success related to patient data management. The interviews were conducted via an online survey by the independent research agency Big Village. The participants had an active role in managing patient data at their respective organizations and were also involved in managing their organization's patient data linkage, connections, storage, management, and utilization by healthcare professionals.

In this article, we share survey participants' concern over the industry's--and their own organization's--ability to overcome challenges and achieve trustworthy performance with measurable outcomes tied to patient and organization success.

Our experts agree that hMDM solutions, identity data management, purpose built to solve the unique challenges of healthcare improve data management practices and will be critical in mitigating potential challenges posed by the influx of additional data of various levels of complexity. Those currently using an MDM/hMDM share with us how their experience is superior to those who are not yet using these beneficial systems.

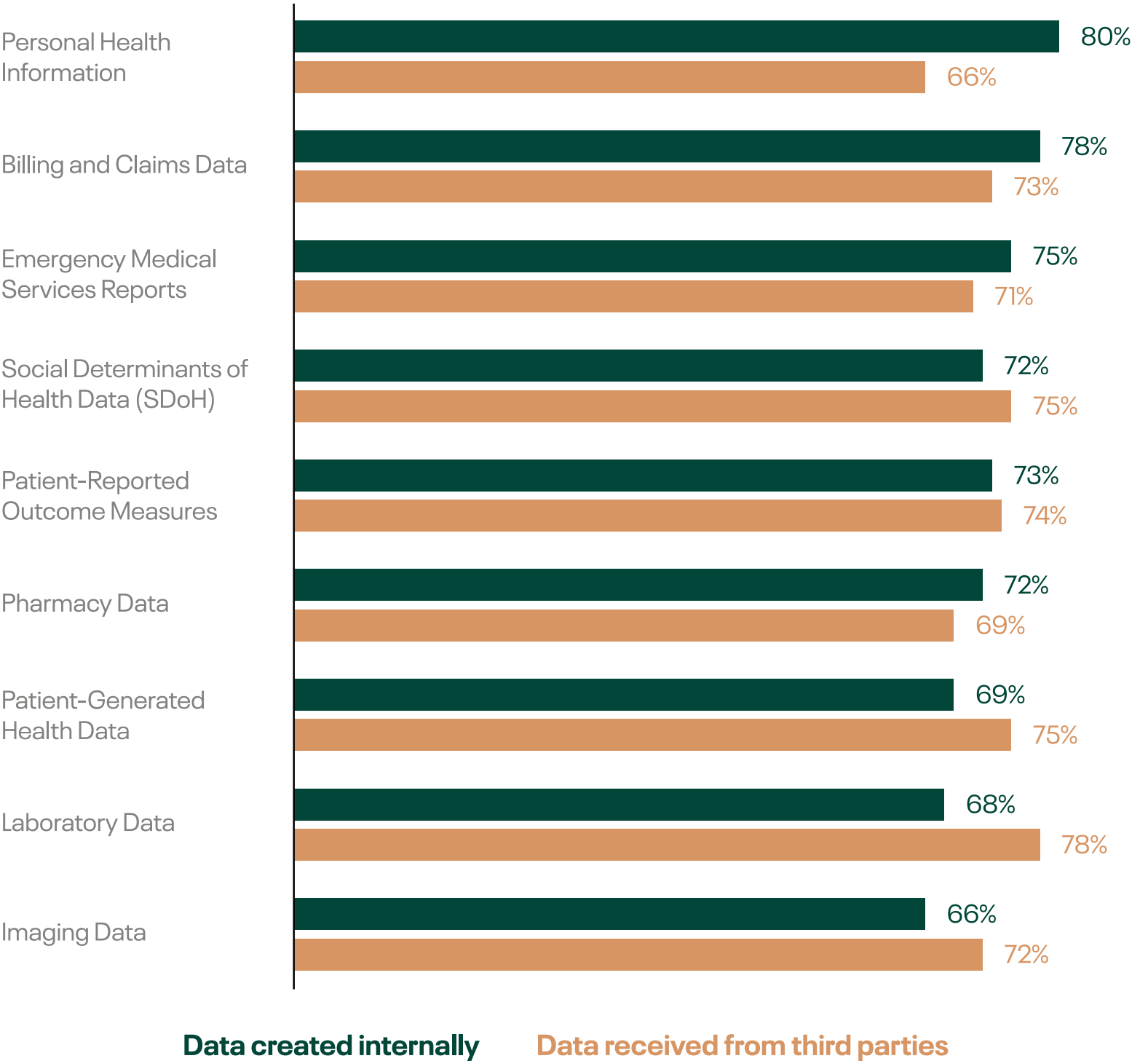
The healthcare industry is drowning in data.

The data healthcare organizations deal with is voluminous and complex. It ranges from personal health information to billing and claims data to imaging data and more. The data spans multiple departments and resides in hundreds of systems. Healthcare organizations not only have their own data but also ingest significant amounts of it from other organizations. To handle this complexity, it is common practice for organizations in the industry to use specialized systems to manage data, such as Master Data Management (MDM) and Healthcare Master Data Management (hMDM) solutions.

MDM solutions identify, link, and synchronize data across different sources. The data is managed in one central system. In order to manage healthcare data, generic MDM solutions require extensive tuning.

hMDM is master data management redesigned for healthcare organizations across the care continuum to meet their healthcare-specific business needs. An hMDM platform can match and manage the data of every person in a healthcare organization—including patients, members, providers, employees, and consumers—with one solution.

About two-thirds of healthcare organizations receive each of the types of data asked about in the survey from third parties



Data must be trusted.

The industry agrees that patient identity is integral to data management and interoperability efforts. Furthermore, **93%** say successful patient data matching is extremely or very important in accomplishing their strategic initiatives.

Half of healthcare organizations say that accurate data matching is extremely important.



Patient data matching is a critical process in healthcare technology that involves accurately linking all the available data within and across data sources to the appropriate person (e.g., patient, member, consumer). This process ensures that every individual has a single, accurate and comprehensive health record, thereby facilitating informed decision-making and improving patient care and experiences.

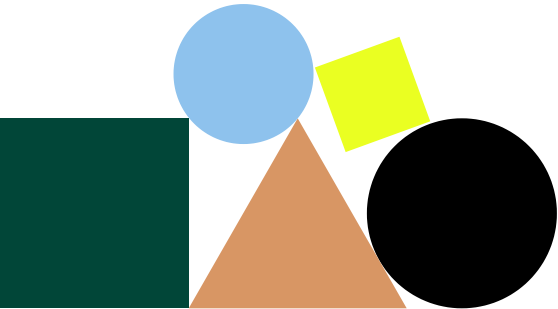
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93%

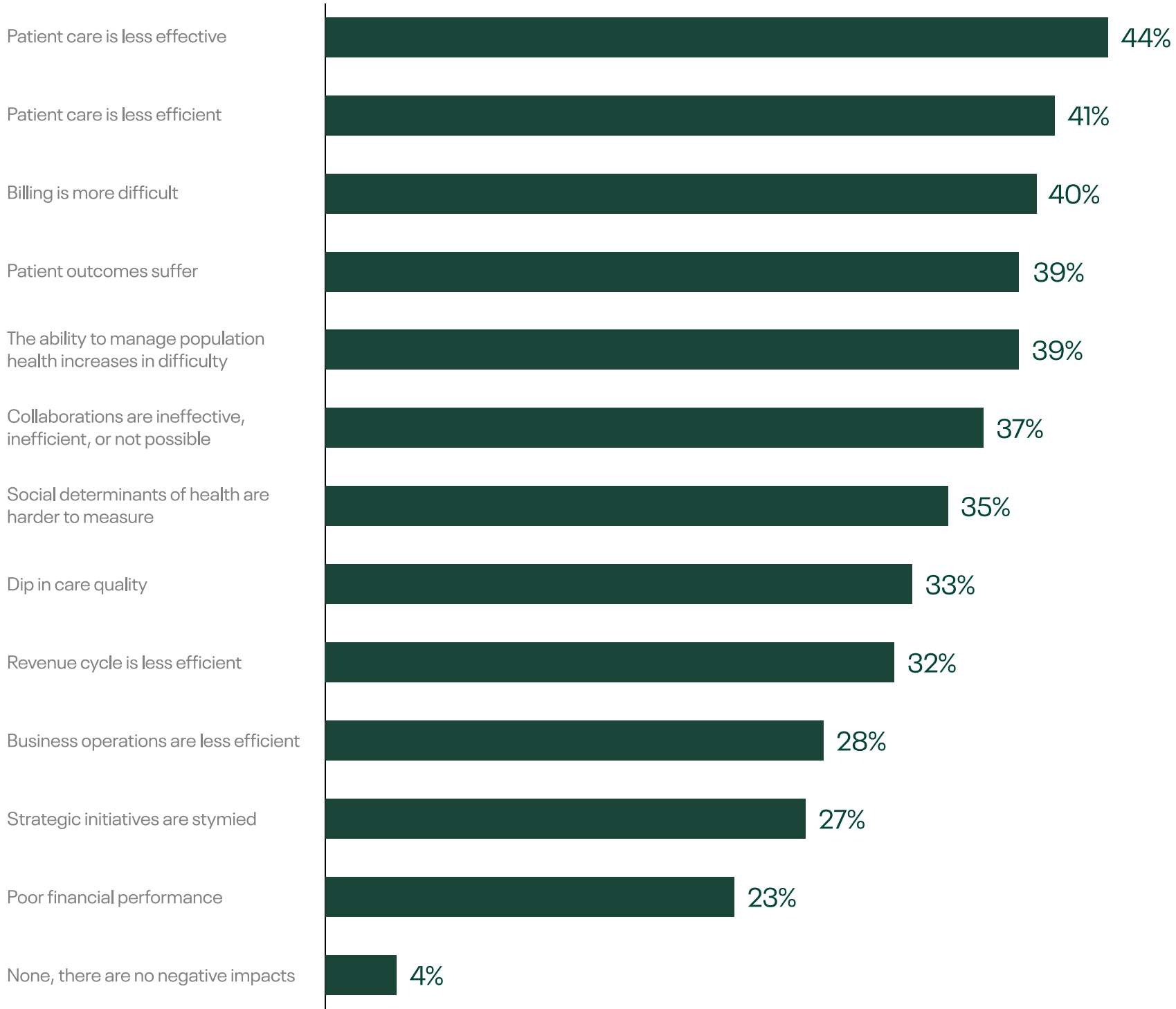
say successful patient data matching is extremely or very important in accomplishing their strategic initiatives.

Organizations recognize the potential for poor patient outcomes and loss of revenue from inaccurate billing which negatively impact reputation and reimbursement levels. **Nearly all executives, 96%, acknowledge the consequences of inaccurate, incomplete, unmatched data across systems.** The perceived risk is much greater among health systems that are more diverse/complex in their business.

- Health systems are more likely to experience negative impact on billing outcomes than hospitals when data are misaligned. They are also more likely to become stymied in strategic initiatives related to data integration and matching than hospitals.



Almost half of healthcare organizations believe inaccurate and unmatched patient data negatively impacts patient care.



Fragmented and siloed healthcare data is challenging to use.

Current organizational data management practices are not perfect. Two-thirds of healthcare organizations are **not completely confident in their data management infrastructure's ability to protect the integrity** of patient data. Nearly half, **49%**, say their patient **data is still stored in fragmented, siloed systems**. Almost half (**47%**) of the healthcare organizations surveyed say that healthcare data is only being managed well in pockets of their organization.

Organizations that are currently using MDM systems to manage their patient data less commonly report these issues. Regardless of size, MDM and hMDM systems help hospitals and other healthcare organizations achieve significant increases in data quality, trust, and outcomes.

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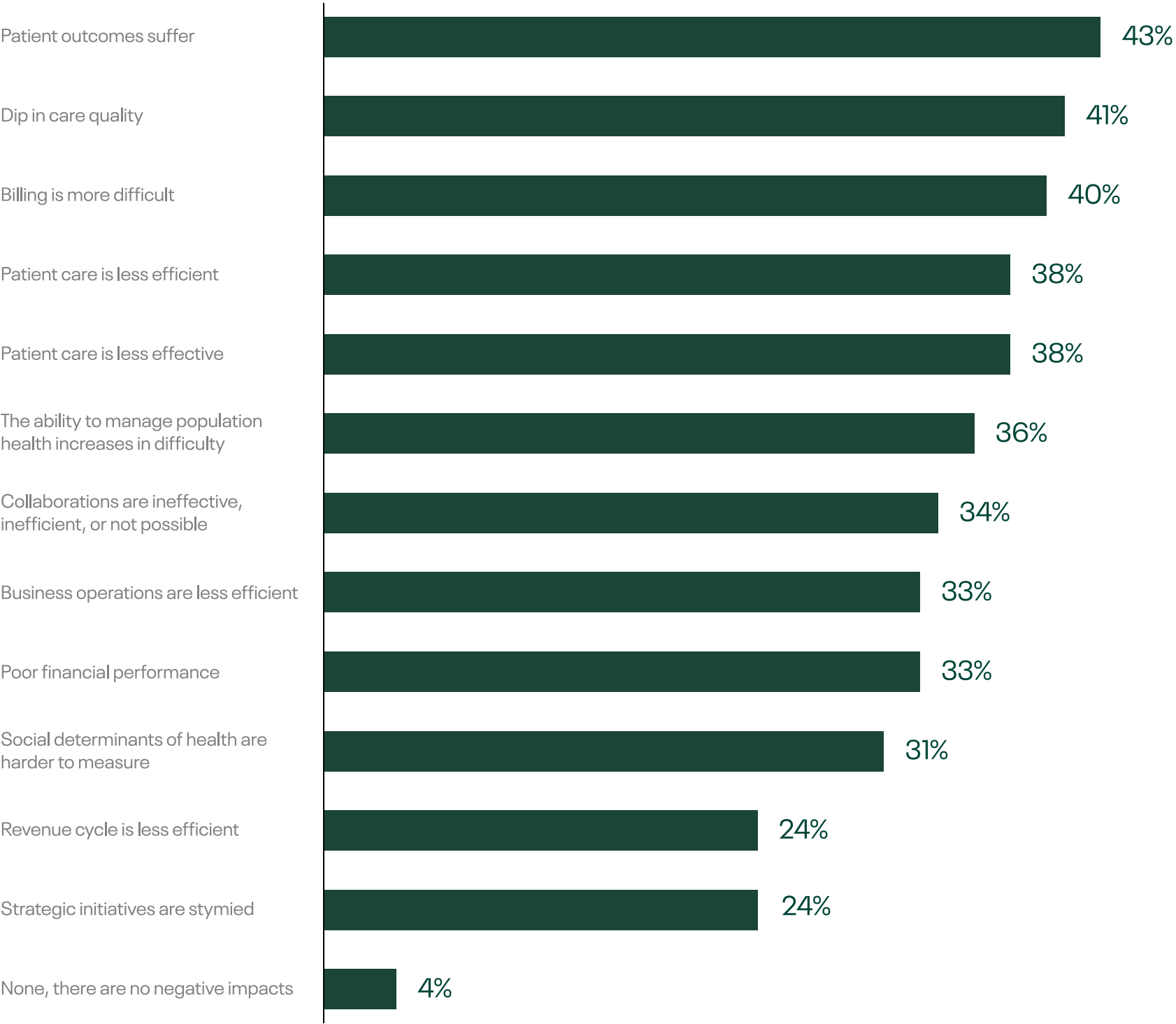
believe that patient data-matching errors will result in a healthcare crisis within the next five to 10 years.

Executives are losing sleep over data concerns.

The anticipated influx in data over the next five-to-ten years is keeping industry leaders up at night. With this influx of data, **57% believe that patient data-matching errors will result in a healthcare crisis within the next five to 10 years.**

The [21st Century Cures Act](#) set standards for the secure and seamless exchange of data among payers, providers and consumers, including the establishment of an information-blocking rule that was finalized earlier this year. Recently, the U.S. Department of Health and Human Services (HHS) released [a new proposed rule](#) to establish information-blocking disincentives for hospitals and health systems. Under the rule, if the HHS Office of Inspector General (OIG) determines an eligible hospital has participated in information blocking, that organization may be limited for incentives through the Medicare Promoting Interoperability Program, the Quality Payment Program and the Medicare Shared Savings Program.

Industry-leading healthcare organizations are deeply concerned that inaccurate data can poorly affect work quality in at least a dozen different ways.



Nearly all industry experts agree that the anti-blocking rule embedded in the 21st Century Cures Act will significantly raise the amount of data that flows between organizations within the healthcare industry. The vast majority (**98%**) of healthcare executives expect an increase in data requests from other organizations, and **97%** predict an increase in data coming into their organization from external sources.

Organizations know their limits and do not feel confident in their current data management approach. The impending data explosion will be too much to handle without significant intervention in the interim. Almost all (**97%**) see future negative impacts of poor data management as the amount of data coming into their organization increases—including poor patient outcomes, deterioration in care quality and more difficult billing.

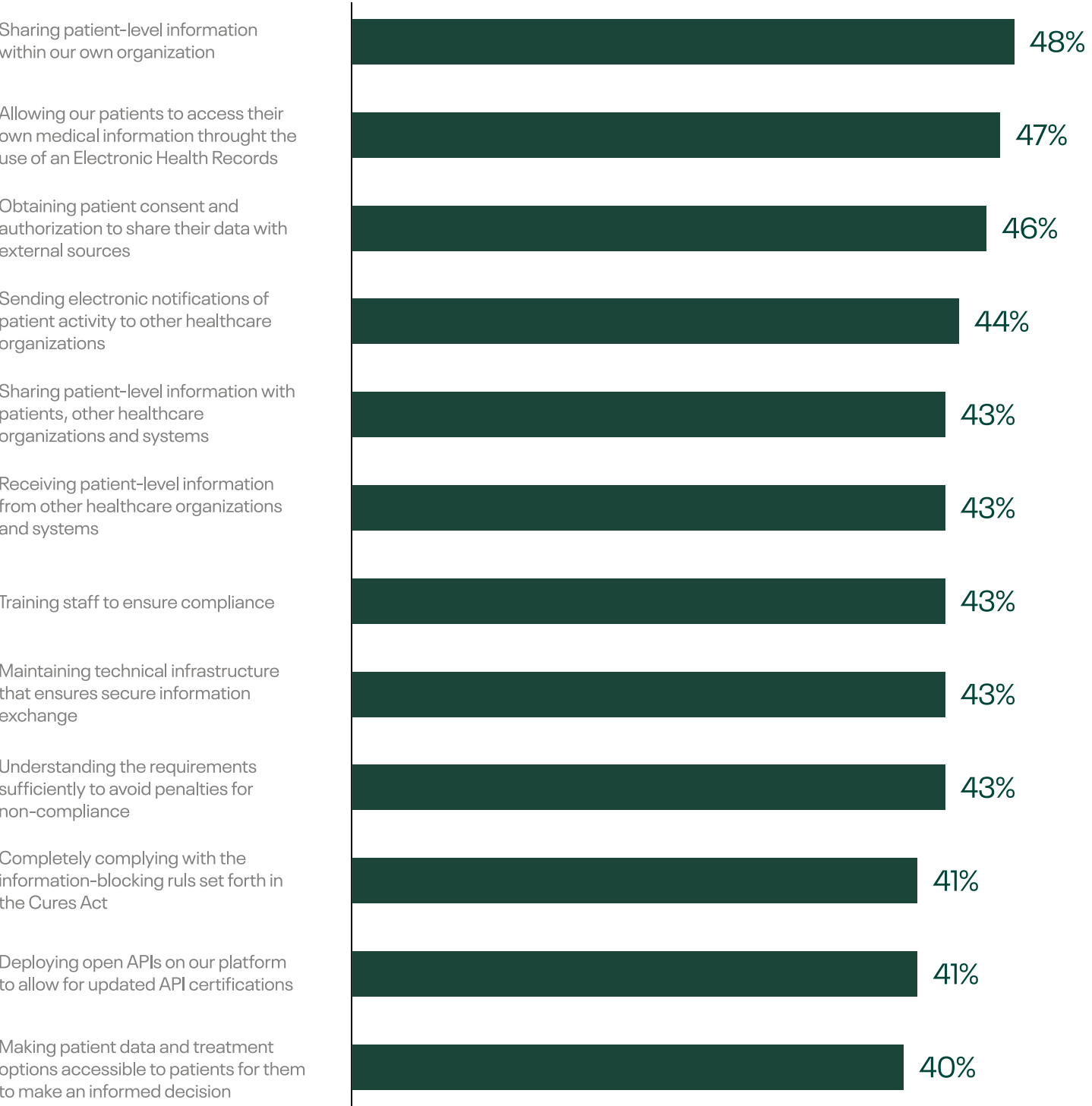
Leaders admit they are not completely ready for a data tsunami.

Although most organizations in the healthcare industry have begun preparing for this data influx, many feel unprepared for the future. Only **22%** of organizations feel “completely prepared” to handle the expected influx. Slightly more than half, **51%**, believe they have made progress, but recognize more can be done. Further, leaders realize that the degree of data will continue to change and that management efforts cannot be deprioritized if they are to stay ahead of the evolving landscape in the near- and longer-term.

Organizations struggle with Cures Act compliance.

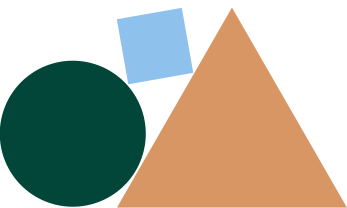
Only about **4-in-10** organizations are completely prepared to comply with the provisions shown in the chart below. Organizations are most commonly prepared to share patient-level information internally, allow patients to access their own information, and obtain patient consent to share their information externally. Notably, more organizations are prepared to share data within their organization than to share or receive data externally.

Less than half of healthcare organizations are prepared to comply with the provisions of the Cures Act that we asked them about.

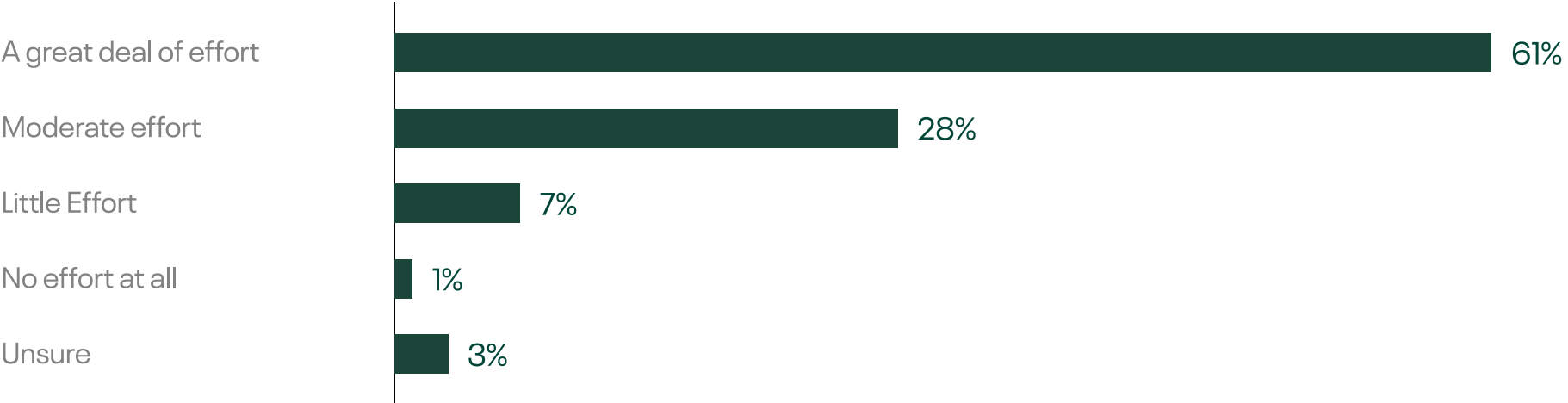


Critically, while more than half of surveyed organizations (**61%**) have invested a great deal of effort and resources into meeting the requirements of the Cures Act, only **36%** report having the necessary comprehensive data quality programs in place to do so.

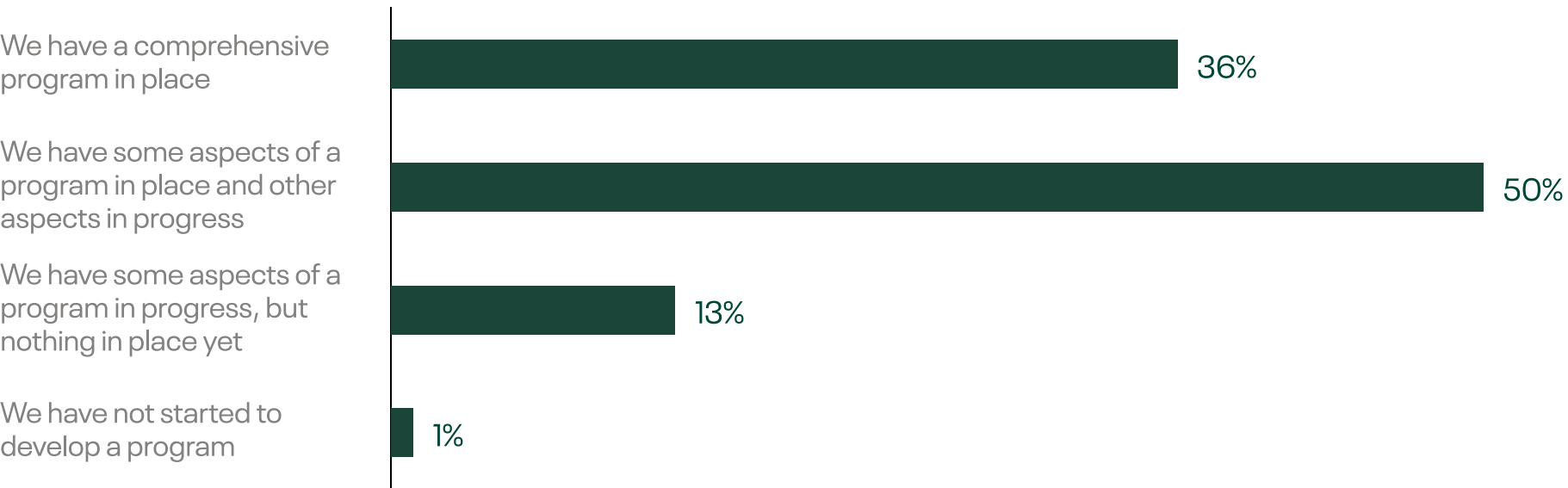
Today, healthcare organizations realize they're behind the 8-ball when it comes to being able to manage data in the ways the law requires. Without significant focus and action, the impending healthcare crisis will materialize. Organizations falling behind should focus on establishing and/or enhancing their MDM/hMDM systems to avoid playing a part in the potential future crisis.



The vast majority of healthcare organizations have put at least moderate effort into Cures Act compliance, and many have put in a great deal of effort.



Barely a third of hospitals and other healthcare organizations have a comprehensive program in place to guarantee the data quality required by the Cures Act.



MDM systems combat the impending crisis.

Nearly all industry leaders we spoke with, **89%**, agree that an MDM/hMDM system is required to manage the increase in data captured in different systems, the increase in requirements to ingest, and the increase in requirements to deliver that are expected in the future.

The use of an MDM/hMDM system to properly identify patients and accurately match their data is a foundational element of health data exchange, yet it still presents a challenge for many organizations.

According to [AHIMA](#), the prevalence of duplicate records in most hospitals is upwards of **10%**, but in health systems with multiple facilities that rate is closer to **20%**.

According to Gartner, “MDM is inevitable. It’s quickly becoming a strategic necessity for digital business... The rewards can include:

- “A shared, trusted, single view of customer data for marketing, sales and service purposes
- “Improved lead times to launch new products
- “Synchronized product and location data across the supply chain
- “Improved business operations for more effective decision making”*

As quantity and variety of data continue to proliferate, the need for accurate and comprehensive identity data management also increases. This is true both for the effective use of available data within the enterprise--to improve patient care quality as well as patient and member experiences--and for the ability to efficiently share complete and accurate information about a person beyond the enterprise, as mandated by the Cures Act. In both cases, a comprehensive set of information about a person (e.g., patient, member) must be assembled from multiple disparate sources, in a way that confidently matches all available information about that person without leaving out important data or co-mingling data for people with similar names or demographics.

If your organization is not currently using an MDM/hMDM, now is the time to take action. To learn more about how these solutions can help your organization meet compliance and handle the incoming increase in data visit, <https://verato.com/platform/>

*“MDM is a complex undertaking. Organizations should make an informed decision on readiness before adopting.” Gartner, December 5, 2019.

Methodology

This survey, commissioned by Verato and conducted by Big Village, collected data from 197 executives from hospitals, health systems, and payers in the U.S. Survey respondents all have an active role in managing patient data at their respective organizations and were also involved in managing their organization's patient data linkage, connections, storage, management and utilization by healthcare professionals.

About Verato

Verato enables digital engagement, clinical interoperability, cloud migration, and provider data integrity by solving the problem that drives everything else—knowing who is who. The Verato hMDM platform, the industry's first purpose-built healthcare master data management solution, enables a complete and trusted 360-degree view of patients, consumers, members, providers, and communities. Over 80 of the most respected brands in healthcare rely on Verato to connect, identify, enrich, manage, and activate person and provider data across the complex digital health ecosystem with unprecedented accuracy, ease, and time-to-value. With a secure enterprise-wide single source of truth for identity, Verato ensures that you get identity right from the start. For more information, visit verato.com.

About Big Village

Big Village is a global marketing and media company. Driven by its diverse group of experts, Big Village provides a new way of working by bringing media, insights, and creative all under one roof. Big Village Insights uncovers not just the "what," but the "why" behind consumer behavior. Driven by data, Big Village Insights delivers integrated expertise and products that fine tune your business strategies, drive bottom line growth, and differentiate in today's marketplace. Find out more at <https://big-village.com>.

