

Healthcare Communication and Care Team Coordination Solutions



Zach Silverzweig
Co-Founder

CEOCFO: *Mr. Silverzweig, would you tell us about the fundamental concept at CipherHealth?*

Mr. Silverzweig: Our main objective is to help improve patient health outcomes and experiences through better communication and care team coordination. That has been the company's mission since we started. The new healthcare act started to create an antennae structure that made that kind of approach valuable for many different stakeholders in healthcare. We initially started focusing in on acute care hospitals, working to reduce readmissions for high-risk patients that have issues such as CHF, COPD, and Pneumonia. We are successful at using a product called Voice to do that, which is a post-discharge calling program. Since then, there are a lot of other challenges and incentive programs. We have been able to develop a suite of products that enable a hospital to achieve best-in-class performance in a lot of different dimensions all focusing on these ideas of improving the line of communication with patients and helping organize the team that you have to better solve issues that come up.

CEOCFO: *How do you evaluate which works best for the widest range of patients?*

Mr. Silverzweig: We are extremely scientific with our approach. I think that the nice thing about what we do with all of our products is that we are trying to reach a large patient population. With the Voice calling program, we can reach 75% of patients after they go home and it gives us a very rich data set to look at different cohorts and to see how the different aspects of the program improve the patient experience. For example, with Voice we will look at what times of day we are calling and what the impact is on reaching the patient if we call a patient late in the evening if they are in New York, or if we skip calling on Sunday mornings for patients that live in other parts of the country. Ultimately it comes down to the result of the program; the company has grown substantially because we have fantastic case studies and we are able to show that this kind of program reduces readmission by 40%. When you start to do that enough and you see that same case study not just in one particular context but in the context of an academic medical center, a rural hospital out in Texas, or a large hospital in system in Virginia, you are able to triangulate and figure out the best practices common in these programs.

CEOCFO: *How do you work with a hospital or organization on the personal side?*

Mr. Silverzweig: I think the thing that drives most success in the program is enabling the right person in the hospital to do the job that they want to do. One of the nice things about our program is the ability to triage different types of patient issues and then route it to the appropriate person for resolution. There is a team in place in almost every hospital. There is probably a group that helps schedule appointments, a nursing team, and a patient experience team. There are probably teams for high-risk patient cohorts for CHF or COPD. To make the personal side go well you just need to get those people engaged at the right time. The nurses talk to different patients and capture what they are saying. They make that interaction on a tablet and then route a concern to the right person in the hospital to resolve it. A nurse manager will be rounding on her and she will talk to three or five patients. By the time she gets to the fifth patient, we have engaged a dietary services person to come to the room and help the first person that had a food service complaint.

CEOCFO: *The concept you are putting forth is that people are working in the positions they want. Is that based on the shortage of healthcare professions so it is more likely someone is working where they choose rather than taking a job of out need?*

Mr. Silverzweig: Healthcare is an interesting industry in which to work. It is different in that you can find people that want to play a role. Right now, there are very few people deciding to become doctors just for the money. There is enough information out there about how hard it is to manage insurance and how hard the market environment is that there has to

be this other element of wanting to help people, and we definitely see that in hospitals. We can see folks that get frustrated if they are not able to act on those basic instincts around helping patients and people. We benefit from this too and we are able to find account managers that have these great skills and come from these great places but want to take those skills and apply them to public health; this allows us to find exceptional resources.

CEOFCO: *Are most of the organizations you deal with taking advantage of the full range of your services?*

Mr. Silverzweig: The short answer is yes. We have been fortunate to work with hospitals that are a little bit cutting-edge. There are people that recognize they have a problem, which is the first step in resolving concerns. There is usually one product to start with as a point of entry; people are excited about Rounding, and then they get excited about Echo, which is our discharge recordings, and it builds from there. We recently launched the remainder of the suite, including Echo, in October of last year. It is relatively new to the market, but people are excited.

CEOFCO: *CipherHealth is not alone in offering services to medical organizations. How do you capture attention?*

Mr. Silverzweig: There is no easy answer. One of the things that is always frustrating is knowing the kinds of case studies that we have and knowing the kinds of stories that we can tell and knowing the kind of team that we have. It is a real challenge to get in front of key decision makers and talk them through what we have. Our favorite thing is when a hospital goes out for RFP; many companies shiver a little bit when a hospital will make a big request for proposal and ask for bids in the industry. When that happens, we almost always win because our story is so compelling. That is our biggest challenge. Our biggest focus in 2015 is just making sure that anytime anyone is thinking about rounding or post-discharge calls or challenges and penalties of the "Affordable Care Act," include us on the list because if you look at the stuff we are doing, there is no comparison with the competition.

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CEOFCO: *What is involved with the implementation?*

Mr. Silverzweig: It depends on the product. Most implementations are four to six weeks, meeting a few times a week with a clinical team. Usually we are coming to consensus around the kinds of questions we are going to ask the patients and the workflow we are going to map into the hospital and understanding the elements of the organization that we are going to tap into as part of the program. We have an advanced interfaced system that allows us to connect with many types of systems and communicate easily.

CEOFCO: *What have you learned along the way?*

Mr. Silverzweig: A lot has changed, but the core idea remains the same. The idea that we are going to improve patient communication and improve care coordination; that fundamental concept has held constant. What we have done to achieve that has definitely changed. We expanded from one product, Voice, to do that and then to a suite. Instead of just communicating over the phone we can now record your key metrics from an iHealth device or capture information during rounds or home health visits. I think the thing that changes the most is the company behind us; every six months we look around and it is new faces, new team, and it is growing. We are hiring and growing very fast. The change for us happens constantly, and I think the question is how we can continue to provide the same level of service and performance as the company grows.

CEOFCO: *CipherHealth was named The Best Place to Work in Healthcare, by Modern Healthcare. What do you understand about making a work environment the way it should be?*

Mr. Silverzweig: There are a few things that we do that I think are really important and special. I have to tip my hat to Randy Cheung; he is the original founder and spends a lot of time thinking about our culture. It comes down, in my mind, to creating a culture of absolute transparency and making sure everyone is able to communicate what they are seeing and to bring up things without fear of repercussions. We have this concept of "fast feedback", where as soon as we see something, we say something; kind of that New York subway model I guess. We really try to act on those things that we see so that we can make sure that we address everybody's concerns and we are aware of where folks are and what they are thinking about in terms of their growth in the company, challenges, or product ideas.

CEOFCO: *Do you find that companies using CipherHealth tend to make improvements in other aspects of the hospital or facility once they have experienced what CipherHealth can help them do?*

Mr. Silverzweig: It depends on the product. We have definitely had conversations with healthcare executives wherein there are these big Aha! Moments, and in those moments the culture changes. I have been in the room when that

happens and you have an executive that realizes we cannot call this an issue, we have to call this an opportunity because if we call it an issue the nurses are not going to talk about it. If we call it an opportunity and every time we see a product with the whiteboard we look at that as a good thing because it gives us something to fix instead of a bad thing. All of a sudden everybody turns around and looks at each other and says that is interesting. Our program can help hospitals immediately identify patients that have a concern. The best hospitals are taking that data collected during that resolution and driving continuous improvement from it. Sometimes it is just a project but it oftentimes is changing the culture and looking at things a little bit.

CEOCFO: *How is business?*

Mr. Silverzweig: Business is booming. We have been fortunate. We have been participating in a couple of large competitive bids and those have gone very well. We have continuous expansion from our customer base, both in terms of new variations on the products that they bought but also a different modular Voice or rolling out Echo for discharge instructions. We have been constantly iterating on our products as well. We started with Orchid just rounding on patients but then developed a comprehensive staff rounding tool which is more of an HR product. In the last year, we have proven we are not a one-trick pony and not a company that just has a single product; we are a company that can develop integrated solutions for healthcare.

CEOCFO: *Which products have resulted in patients taking notice?*

Mr. Silverzweig: The product the patients are most happy with is Orchid. When you have a complaint while you are an in-patient in the hospital and you are talking to your nurse and the nurse shows you on the tablet that she understands the problem and is going to send the environmental person who is going to fix the window that is drafty, three or ten minutes later somebody shows up and fixes that problem, well the patient cannot believe it. We have these fantastic stories of patients blown away by the quality of the communication that is going on in the hospital. My first answer though is Voice; I think it may not be as fun to experience but it helps the patient outcome so dramatically that there is really no comparison. When we roll out a Voice program, we absolutely almost every time reduce readmissions by 40%. I think that change is something an individual patient might not realize or appreciate, especially the scale on which that change impacts healthcare.

CEOCFO: *When a patient has a concern involving a doctor, how quickly can the system get to the doctor or doctor's office for a resolution and is it part of the mindset of the doctor that they will get to an answer?*

Mr. Silverzweig: This is an important point for hospitals focusing on improving the patient experience. Most hospitals take a nursing-only view of the patient experience; it is reported on a nursing unit level and there is not enough data to throw down and identify a hospital service or even a physician that is causing a patient experience problem. There will be comments that come back as part of a survey and those can drive some changed behavior. The way that we help this problem is through data aggregation. It is tough to go to a doctor with one patient's problem; a doctor is a scientist at a fundamental level and they understand end values and it is easy to dismiss a single patient that has a single problem. What is important is to aggregate that information collected from forty patients over a month or quarter and then lay it out there. The data and reports do drive behavioral change. We see that though there is a bit of initial reticence by the hospital team to tell the doctors that there is a problem, the doctors themselves love to hear it. They are typically type-A and competitive. All it usually takes to drive improvement is to present a report that is unquestionably accurate, and they will start engaging in different activities to prove their ranking on that report which is a backdoor to improving the patient experience.

CEOCFO: *Why choose CipherHealth?*

Mr. Silverzweig: I would choose CipherHealth because of our team. I think if you met any three people in the company, either a developer, a product person, an account manager, sales or inside sales, the quality of the people shines through in every aspect of the business. The technology solutions are fantastic and absolutely amazing and best-in-class. The case studies are best-in-class. The people are best-in-class. If you met Jennifer Crisp or any of the folks that we have, I do not know how you could say no.

Interview conducted by: Lynn Fosse, Senior Editor, CEOCFO Magazine



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