Optimizing Clinical Workflow for New Patients

Ken Rosenfeld
CEO & President

CEOCFO: *Mr. Rosenfeld, what is the concept behind eHealth Technologies?*
Mr. Rosenfeld: eHealth Technologies focuses on services that improve transitions of care. Our Referral Pathways solution optimizes the clinical workflow for new patients who get referred to major academic and regional medical centers when they need advanced care. Over half of the top one hundred hospitals around the country utilize our service to date. We also effectively handle medical images. Our Image Exchange solution integrates images into health information exchanges that are then shared as part of aggregated community or statewide health records for the patients. Users can access all types of image information, including x-rays, MRI's and CAT scans, in the same environment they use to get all of a patient's healthcare information.

Our Referral Pathways solution includes retrieving all the healthcare information that is needed for a patient referral. We organize and add intelligence to all the information we retrieve, and deliver this electronically to the referral center. We also streamline communications back to the outside referring and treating clinicians that are part of the patient's care team. Finally, we are insuring that all of this information can be put together and visualized in actionable ways for these healthcare institutions to understand what is happening with their patients from a continuity of care perspective, but also what is happening with their referral network so that they can provide the best possible service to all of their outside physicians.

CEOCFO: *You mentioned you add intelligence. Where does that come in?*
Mr. Rosenfeld: It is interesting, because there are all kinds of medical information that is needed for patients, including all kinds of documents, images and pathology. We are organizing the information in a way the clinicians want to see it. This includes providing very quick ways for them to get to the information they need by highlighting and linking to certain sections and key words, making it very easy for them to navigate the patient's medical history that can come from lots of different sources and include hundreds of pages. Application of intelligence also applies to the imaging capabilities. With both our referral solutions and our solutions for health information exchanges, we are able to provide the ability to view any type of image from any location and compare images side by side. The idea is to take that information, pull it all together intelligently, and thus make it easy for the clinician to review the patient's medical history and plan for the treatment and care of their patients.

CEOCFO: *What are the challenges over and above a normal referral system that one might have in the medical community?*
Mr. Rosenfeld: That is a great question! One of the biggest issues we are addressing is Empty Folder Syndrome™. Most of the time what can happen at these bigger referral centers is that they will want to get the patient into the hospital as soon as possible, so they can get the referral and provide services. Often they will go ahead and schedule treatments very quickly, sometimes within twenty-four to forty-eight hours. When the patient shows up the clinician is there, but the clinician does not have enough of the patient's history to determine the treatment plan. Therefore, it becomes more of a meet and greet. They are asking the patients all of the same questions about their history that they probably have answered many times before. They are filling out all of the same information that they have probably filled out many times before. It becomes frustrating for the patient and is an unproductive first appointment. In the end they send the patient away and say, "Come back in a week once we have the rest of your information." What we are trying to do is cure Empty Folder Syndrome. We can access all of these outside records, images, and pathology, typically in around three business days or less and we can fill that folder before the patient shows up for their first appointment. That way the physician has a chance to review the patient's medical history, can set up a care plan for the patient, and when the patient does show up, they are having an educated session where the patient does not have to provide the same information that is already

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known by the clinician, and together they can decide right away on a care plan and get on the path of improving the patient's health.

CEOCFO: *Do all of the parties have to be a partner with you or be utilizing your service or are you able to pull in physicians that might not be a direct client of yours?*
Mr. Rosenfeld: Our customers are the large referral centers like Massachusetts General Hospital, University of Pittsburgh Medical Center, MD Anderson Cancer Center, and many others. All of the places that we go to collect records are not our customers. However, because the patient is undergoing care and the federal HIPAA laws allow hospitals to retrieve all of their relevant healthcare information, we are able to act on our customer's behalf and collect records. We are now collecting records from over twenty five thousand health care locations a month. We have figured out how to do this very, very well. If we can get information securely over the Internet, we do. However, we still get lots of faxes and FedEx boxes that come our way. We pull all of that together, aggregate it intelligently and deliver it all electronically to our customers.

CEOCFO: *How are you able to coordinate information from disparate systems that probably do not match up easily?*
Mr. Rosenfeld: We have over seventy-five people in our Operations organization that are focused and trained to access this information. They contact outside facilities and get the information delivered to us however they are able to. Because we have already received the authorization from our customer to retrieve this information, we work with those outside facilities to insure all of the relevant medical history information for our patient is transferred. We have people and processes and technology that makes this as streamlined as it possibly can be.

> "Once you find the right person they get it. They become aware of how this could be hugely beneficial to them. When we also add in the fact that the information we manage creates greater visibility into their referral network that gets them even further excited about the solution. They now can see where their referrals are coming from, what their referral trends are, and who is referring to them. Now, not only do they get the benefits of curing Empty Folder Syndrome, but they also gain a great benefit from having an unmatched view of their referral network. When you combine these together it is a very compelling offering." - Ken Rosenfeld

CEOCFO: *How do we know that nothing gets transposed or transcribed or put in the wrong place? How do you maintain the accuracy?*
Mr. Rosenfeld: That is part of the beauty of what we do, because it is amazing how often hospitals will send incorrect information. We have a well-defined quality process which includes getting all of the appropriate demographics about a patient, so we can uniquely identify that patient when we are contacting facilities to retrieve the information. When the information comes to us, it goes through a QA process that uses a combination of two human beings and digital search capabilities to validate the information we are retrieving is for that patient. If we get any page of a medical record that does not have the patient's name as an identifier on it we actually go back to their originating facility to have them validate it is the right piece of information. We have provided an additional layer of privacy and security for the hospital where the patient is being referred to, because when they ultimately see the patient's information it has gone through a pretty extensive QA process. We isolate them from these problems and almost create a "HIPAA firewall" insuring that no incorrect patient information ends up at their facility.

CEOCFO: *When you are talking with a prospective hospital do they understand immediately the difference and the depth of your solution? Do they need convincing?*
Mr. Rosenfeld: It is interesting, because we do not have a big competitor. Our biggest competitor is status quo at the hospital – doing things the same way they have done them for years, which is inefficient and burdensome to the staff and the patients. Sometimes you do need to find the right person who really understands this challenge. However, all hospitals have this challenge. Once you find the right person they get it. They become aware of how this could be hugely beneficial to them. When we also add in the fact that the information we manage creates greater visibility into their referral network that gets them even further excited about the solution. They now can see where their referrals are coming from, what their referral trends are, and who is referring to them. Now, not only do they get the benefits of curing Empty Folder Syndrome, but they also gain a great benefit from having an unmatched view of their referral network. When you combine these together it is a very compelling offering.

We have a long history, a ton of case studies and tremendously happy customers. Our last customer satisfaction came in at ninety-five percent outstanding or good rankings from our customers. Because of our over eight-year history and because we are working with other hospitals that they recognize, they know we can do what we say we can do.

CEOCFO: *How do you ensure ease of use?*
Mr. Rosenfeld: First of all, we are not an electronic medical records system or an EMR as they are generally known. An EMR is the system the clinical staff retrieves data from when the patient is sitting in the emergency room or doctor's office. What we try to do is make it easier for them to access the information they need by delivering all of this outside information into those same systems. Now they do not have to go to yet another system to find all of the outside medical history for their patient. Ultimately, we improve their internal systems and EMR with our solutions, but we are not the EMR itself.

CEOCFO: *What has changed over time? What have you learned as you continue to develop and roll out and people are using the product?*
Mr. Rosenfeld: There has been a lot more automation in what we do, so that we are able to do things faster and more efficiently. I think that one of the big things that has evolved over time is how we have taken a fairly basic records retrieval service and realized that it is just part of a bigger problem around managing patient referrals. As we have added capabilities around that our solution has become much more compelling at the top level of hospital organizations. Our Referral Pathways solution can be applied across their institution, not just to a transplant department or a cancer center. Our biggest change has been adding those capabilities that bring tremendous value at the enterprise level of the organizations; including adding intelligence to improve clinical access and making the data we retrieve actionable by our customers. We are continuing to advance and innovate on our enterprise wide solution, and maintain a unique position in the marketplace with no true competitor.

CEOCFO: *What surprised you as the company has grown and developed?*
Mr. Rosenfeld: I am generally an optimistic person and I think we have optimistic goals. However, what surprised me, if you think of it from an entrepreneurship perspective, is how truly conservative you have to be from the standpoint of the work it takes to rapidly expand, particularly in this healthcare market. We have grown every year and we have done quite well by any standard. However, I was naïve early on from the standpoint of the rate of growth what we could expect to maintain, based upon the realities of the market place. Much of the advice that I give to fellow entrepreneurs is to take your most conservative schedule, take your most conservative estimate of how much it will cost to develop your product, and *triple* it and you *might* have it right. I could not be happier with our success. We have done it relatively quickly. There were four of us eight years ago and now we are over one hundred and fifteen people at eHealth Technologies.

CEOCFO: *What should readers take away about eHealth Technologies? What should they remember?*
Mr. Rosenfeld: I think the key thing we did right was a very strong focus on the customer and customer satisfaction and not just building it and expecting they will come. We have truly created solutions in concert with our customers and made sure that it met their needs. We have tremendously satisfied customers. A huge part of our growth is related to the satisfaction they have with eHealth Technologies and we have a good name in the industry.

You also have to keep innovating, and I believe eHealth Technologies has done that very well throughout its history. You cannot stay still. The market is just way too dynamic. I am extraordinarily excited we are now innovating in this realm of continuity of care. There are big challenges in healthcare, without a doubt. There are many people moving into healthcare because of that and that is good. It is ripe for innovation.

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

eHealth Technologies

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