



1001 - One Touch Tour of Three Use Cases

Track: Interoperability/Integration

Presenter: Tina Whims

Organization: Frederick Health Hospital, Frederick, Maryland

Scheduled: Saturday June 10 at 8:30 am



MEDITECH offers powerful interoperability tools under their Traverse toolkit. This session will focus on MEDITECH's OneTouch, which provides real-time viewing of records in other vendor EHRs. Frederick Health will share details for three One Touch use cases.

Learning objectives:

- Learn about functionality available with MEDITECH's One Touch tool.
- Learn about specific use cases deployed at Frederick Health.
- Review considerations for implementing a One Touch connection.

Tina Whims is a seasoned healthcare IT professional with extensive experience implementing, managing, and supporting ambulatory information systems. She is particularly interested in projects to improve access to clinical information for patients in our care.

1003 - How to Extract Essential Data from BCA for Revenue Cycle

Track: Revenue Cycle and Patient Access

Presenter: Jana Tran

Organization: Emanate Health, Covina, California

Scheduled: Friday June 9 at 10:10 am

Every month, our Director of Business Services has created the reports to be viewed by Vice President and Chief Financial Officer. The tracking details and comparing of different reports to come up with the general report was time consuming task. After consulting with our Director of Business Services, there were two solutions to approach this issue. One was reach out to the third-party software vendor who can tailor of the reports and second was looking into the MEDITECH for solution. In a few weeks exploring the MEDITECH BCA (Business and Clinical Analytics), we were able to work with programming to create a dashboard and reports with the MEDITECH system which fulfill our needs.

Together we focus on identifying the criteria from quarterly tables from Medicare and added them in the BCA. Second, we took the quarterly tables and uploaded them into DR (Data Repository) and lastly created patients' accounting datasets to pull in patient's data. BCA will check against patient account

number with the CSID number. If there is a match found in CPT codes of table1 or table2, then the fallout report is generated. Those fallout accounts will be reviewed by the departments and HIM coding to correct the issues and improvement.

Learning objectives:

- Ability to have dashboard and quick reporting for executive team.
- Ability to have daily reports and identify errors.
- Ability to track denials by all payers to identify trends and opportunities for growth
- Able to identify coding and billing issues and optimizing the process.
- Minimize denials and increase revenue.

Jana Tran has been with Emanate Health for 28 years and have been supporting Revenue Cycle from Scheduling to Registration, HIM Coding and Billing departments. We were with MEDITECH Magic for 25 years and we are now with Expanse for three years. We are utilizing Expanse on most of our business lines other than the billing clearing house. We are in the process of getting things ready for Expanse 2.2 and Go-Live in October 2023.

1004 - Comprehensive Swing Bed Care Plan and Activity Policy

Track: Patient Care

Presenter: Mallory Palmer

Organization: Tri Valley Health System, Cambridge Nebraska

Scheduled: Friday June 9 at 10:10 am

Tri Valley was driven by both CMS and senior management to conduct a re-evaluation quickly and effectively, while also adhering to regulatory requirements, for their current Swing Bed patient Care Plans and Activity Program. In this presentation, we will demonstrate how we used all in-house MEDITECH tools to create a new workflow and advanced documentation plan for our Community Access Hospital to manage Swing Bed Patient Conditions, and activity plans. We will review the workflow design, build, execution, and ongoing use (through screen shots and test data) and lastly how we monitor for use and timeliness.

Learning objectives:

- Utilize MEDITECH to enhance workflows in the Community Access Hospital setting
- Design, test, review, execute and ongoing evaluation of multidisciplinary team project
- Utilize BCA for quality and post live management of the system.

Mallory Palmer, Clinical Informatics and EHR Safety Advisor, has been at Tri Valley Health System for more than seven years. She is originally from Calgary, Alberta Canada where she worked in health care IT for 15+ years.

Mallory is part of a five-person IT team who manage our full EHR MEDITECH system. She was the project leader the original build/purchase and design of the system six years ago alongside two other facilities to build one EHR system.

Tri Valley Health System currently uses the full MT suite for all departments (but not limited to) Finance/MM, Dietary, Ambulatory, Surgery, Acute, ER, Therapies, Lab, Imaging, and Patient Access/CWS.

1005 - The Patient Portal Experience

Track: Expanse

Presenters: Josh Robinson and Kristina Gray

Organization: Willis-Knighton Health Systems, Shreveport, Louisiana

Scheduled: Saturday June 10 at 9:20 am

The future of digital patient care is through patient engagement technologies tools such as the patient portal. The advent of the patient portal is to facilitate the delivery of healthcare to improve health outcomes, increase patient satisfaction by optimizing the portal experience for increase patient engagement. Effective patient engagement experience and interventions for effectiveness meant taking a systematic approach to collaborate between acute and ambulatory leaderships teams representing project management and information systems. There were a series of factures and challenges involving critical decision-making and analysis were required to achieve desired patient outcomes effective patient engagement from multiple workflows and documentations. The presentation discusses the processes involved including the build features and the challenge of striking a balance between the blocking rule and privacy laws to entrust the Cures Act and portal features were not compromised.

Learning objectives:

- Comprehensive understanding of the Cure's act and information blocking.
- Critical decision-making and analysis skills required to achieve desired patient participation and engagement.
- Communication strategies with a systematic approach to collaborate between acute and ambulatory.

Josh Robinson is the Director of IT Applications and Analytics.

Kristina Gray is the VP - Decision Support & Analytics

1006 - Person Dictionary Automation

Track: Support & Technology

Presenter: Robert Farrell

Organization: Royal Victoria Regional Health Centre, Barrie, Ontario

Scheduled: Saturday June 10 at 9:20 am

This presentation covers the automation used to bring four Client/Server Person and Provider dictionaries into a single Expanse Persons dictionary. It shows how to link third-party systems to the Persons dictionary for data quality.

Learning objectives:

- Automation possibilities in MEDITECH.
- Leveraging customer defined screens to link third-party systems like payroll and positively identify users' creation source.

- A method to convert users and providers from Client/Server to Expanse Persons.

Rob Farrell is passionate about dictionary accuracy and time saving process automation. He is skilled at problem solving, manipulating data sets, and developing with out of the box solutions using existing tools in new ways. Rob has made the C/S Provider dictionary and the Expanse Persons dictionary a priority for data quality using automation and SQL based data checks for over eight years. He has leveraged scripting, integration engines, and other technologies to automate one time and ongoing processes. During his sites MEDITECH Expanse implementation, his primary focus was the Persons dictionary. Rob Farrell has supported most aspects of a MEDITECH HCIS environments for 22 years and has been with the Royal Victoria Regional Health Centre in Barrie, Ontario since 2003.

1007 - Expanse 2.2 Web ED Nursing and Build

Track: Expanse

Presenter: Kristen Springer

Organization: CalvertHealth, Prince Frederick, Maryland

Scheduled: Thursday June 8 at 1:30 pm

We will take you through the entire Emergency Department display as we have built it at CalvertHealth. Learn about launching, navigation, chart, triage, documentation, and discharge. See how we built the patient list formats, the triage screen, and provide some widget information. Be empowered to build your own model in the Web version of Expanse in your facilities as you learn about our 2023 implementation.

Learning objectives:

- Attendees will receive an introduction to navigating as a nurse in Expanse 2.2.
- Attendees will see an example of how our Emergency Department utilizes the tracker.
- Attendees will get an understanding of how interactive widgets are utilized from the chart and in the new hand-off routine.

After receiving her Bachelor's degree in Clinical Laboratory Science in 1995 from the Medical College of Virginia, Kristen Springer began her career at Calvert Memorial Hospital as a Medical Technologist in the Laboratory. After 13 years, during which I assisted in the Microbiology build of MEDITECH Magic, she transitioned to the Information Technology department. In October of 2016, the facility went LIVE with MEDITECH 6.15. Through this transition, she advanced in MEDITECH rule building and Report Designer. In May of 2021, the facility implemented the Web Version of Expanse 2.2 for the physicians. In January of 2023, we completed our transition by adding Expanse 2.2. While working directly with our physicians and nurses, the facility created a platform with alerts that provide an optimal environment for the best patient care. Mallory is currently enrolled in a Masters of Leadership program at Walden University.

1008 - Ambulatory and Acute Collaboration for Expanse Implementation

Track: Expanse

Presenters: Dr. Douglas A. Janowski, Angie Baker, and Tammy Goldsmith

Organization: Willis-Knighton Health Systems, Shreveport, Louisiana

Scheduled: Friday June 9 at 9:20 am

The implementation across all treatment venues has led to greater demands for the integration across ambulatory practice settings and acute hospitals. The coordination processes, when integrating ambulatory-specific workflow with the hospital systems and shared workflows, requires coordination mechanisms to move beyond standardization plans coordinated by the organization to reciprocally make agreed upon adjustments for clinical decision making. We will share some of the strategies implemented for reciprocal coordination to include vendor selection and ongoing support staff.

Learning objectives:

- Characterize elements to create successful implementation of EHR.
- Effective collaboration strategies for expanse implementation – Ambulatory and Acute
- How to prepare for system-related barriers
- Interoperability between different systems that aligns with new workflows and other legacy systems
- Strategies for data pre-load and integration
- Incorporating clear and consistent communication since leaders varied across sites.
- Dedicated resources IT-based project managers partnering with individual practices and clinics

Douglas A. Janowski, M.D., Senior Physician Advisor – Information Technology and Clinical Integration.

Angie Baker, Senior Manager IT Analyst, has 24 years of experience at WKHS supporting clinical applications and leading Financial applications. She earned a degree in Computer Information System from Bossier Parish Community College. She leads a dynamic IT team for the health system and is a subject matter expert in the numerous modules in Magic, Expanse, and Soarian.

Tammy Goldsmith, VP of Health IT Consultant with The Shams Group. Tammy has a degree in Business from Columbia College with over 20 years of healthcare experience with ten plus years with MEDITECH including MAGIC, Client Services and Expanse Financial and Clinical application and more than five decades of Siemens Soarian Clinicals Experience.

1009 - Normalizing Front-End Dictation into Provider Workflow

Track: Expanse

Presenter: Winchi Li

Organization: Southlake Regional Health Centre, Newmarket, Ontario

Scheduled: Friday June 9 at 2:10 pm

Front-end dictation allows for real-time rendition of speech into text. When used in conjunction with Web Acute documentation, it enables the user to dictate directly into the electronic health record. Since the adoption of front-end dictation by the physician group at Southlake Regional Health Centre, many benefits have been noted, including reducing telephone dictation, cost reductions, and time saved.

However, it also came with its own set of challenges. This presentation will cover the integration of front-end dictation into MEDITECH, its associated benefits and challenges, as well as how these challenges were addressed.

Learning objectives:

- Gain an understanding of front-end dictation and its associated benefits and limitations.
- Understand strategies around the implementation of front-end dictation, providing learners with a framework for implementing the technology at their facilities.
- Understand the challenges faced with front-end dictation and future opportunities to increase adoption, thereby allowing users to learn from the challenges we face and be better prepared to handle them.

Winchi Li is a Clinical Informatics Specialist at Southlake Regional Health Care. While he is a trained pharmacist with over five years of pharmacy practice experience in the hospital and community pharmacy settings, he has long held an interest in technological solutions in healthcare. This subsequently led to his studies in health informatics at Toronto Metropolitan University, which were completed in April 2021. Winchi has since joined the clinical informatics team at Southlake several months later and continue to play a role in contributing to patient care from an informatics lens.

1010 - Practical Approaches to Downtime Strategies

Track: Expanse

Presenters: Cody Adams and Jason Johnson

Organization: Willis-Knighton Health Systems, Shreveport, Louisiana

Scheduled: Thursday June 8 at 1:30 pm

A system's EHR availability and speed are critical in the decision-making process for Acute and Ambulatory practices. Relying on electronic health record systems is essential for a high-performing healthcare care organization and when disrupted during EHR maintenance and unexpected downtime can increase risks to patient safety, therefore, the following security and practical approaches can be implemented for down time strategies. Implement a contingency plan and alternative methods for maintaining continuity of care by identifying key areas of risk during EHR downtime periods and plans for documentation and downtime viewers. We will then discuss the people, technology, and processes (workflow) required to facilitate effective downtime procedures.

Learning objectives:

- Gain knowledge on security and practical approaches towards implementation methodologies for down time strategies for acute and ambulatory downtime.
- Begin planning and exploring options for data replication software for files during downtime.
- Develop process for clinical documentation and order sets during downtime.

Cody Adams is the I.T. Director of Network and Customer Service.

Jason Johnson, BSN, RN, CEN, CPEN, is a Registered Nurse at Willis Knighton Health System in Shreveport, LA. Jason has been an emergency room nurse for Willis Knighton since 2016 and joined the IT

Department in 2021. He is a Certified Emergency Nurse and Certified Pediatric Emergency Nurse, an instructor for the Trauma Nurse Core Curriculum, and serves on several committees for the Louisiana Emergency Nurse's Association. Jason's nursing passion is in education, both for his patients and in precepting new hire nurses into emergency nursing. In his spare time, he is an avid board game enthusiast and movie watcher. He loves to travel, especially if there is a water involved.

1011 - Health Information Management – External Access. How to Manage Confidentially in a Large Health System

Track: Expanse

Presenters: Josh Robinson and Mailan Nguyen

Organization: Willis-Knighton Health Systems, Shreveport, Louisiana

Scheduled: Saturday June 10 at 8:30 am



As hospital systems and healthcare institutions adopt electronic medical records, it creates a new challenge in the management of external third-party access to electronic health records. When protected health information is stored in an EMR, there is inherent risk that general access without source verification processes in place can increase risk of HIPAA violations. Exploring approaches to prohibit access to EHR such as establishing third-party agreements or selective criteria.

Learning objectives:

- Implement strategies to reduce security risks and vulnerabilities.
- How to develop auditor views with limited criteria.
- Examine different user-specific safeguards for EHR access.

Josh Robinson is the Director of IT Applications and Analytics.

Mailan Nguyen is a Senior Healthcare IT Consultant with The Shams Group.

1012 - Browser Strategies for Expanse

Track: Expanse

Presenters: Cody Adams and Zia Shams

Organization: Willis-Knighton Health Systems, Shreveport, Louisiana

Scheduled: Saturday June 10 at 10:10 am

While organizations work towards successfully implementing new electronic health records (EHR), discoveries are being made regarding EHR browser capabilities. Exploring the architecture for the best browser extension contributes towards the optimization of EHR. The selection process should be explored to optimize the way information is shared, enhance how programs are implemented and improve care delivery. We will present evidence-based examples of how browsers can ease workflows by eliminating the need to constantly switch between different platforms or impede user experience and interrupt workflows. The right browser extension enables providers to access all data from a single source, improve workflow and provide exemplary patient care. Learn about MESH, Microsoft Edge, Google Chrome, and Ezbrowser.

Learning objectives:

- How to address security vulnerabilities with Edge and Chrome.
- How browsers can ease workflows.
- How to maintain the highest levels of security for patient data and remain HIPAA-compliant.

Cody Adams is the I.T. Director of Network and Customer Service.

Zia Shams, CEO with The Shams Group, has over 33 years of experience with network and software for various industries. As a Healthcare IT Advisory, Zia's expertise includes developing desktop and portal-based software modules/applications as well as developing simple to complex HL7 or non-HL7 integration technologies for various EHR/EMR) MEDITECH, Cerner, Soarian, Quadramed, NextGen, Allscripts, and more_ leading implementation and testing of HIS modules, developing Promoting Interoperability solutions, Enterprise Data Warehouse for Healthcare, iOS/Android mobile applications and performing strategic and operations consulting engagements for various healthcare organizations.

1013 - Early Warning Systems (NEWS & PEWS)

Track: Patient Care

Presenter: Kelsie Aitchison

Organization: Southlake Regional Health Centre, Newmarket, Ontario

Scheduled: Friday June 9 at 1:20 pm



NEWS and PEWS are tools used to help improve the early detection and response to clinical deterioration in patients. At Southlake Regional Health Centre, the score can be found in many places within MEDITECH and are available for all clinicians to view. Since implementing PEWS and NEWS we have seen better collaboration between the patients' care teams and more proactive responses to the early signs of a declining patient. This tool also offers novice nurses a standard way to identifying acute deterioration in their patients. There have been many benefits to building and implanting this tool, as well as some challenges. During this presentation we will discuss in more details.

Learning objectives:

- Understand how implementing Early Warning Systems can help identify deteriorating patients and allow for early intervention thereby improving patients' outcome.
- Gain knowledge of the many places the tool and scores can be imbedded within MEDITECH and how it can be utilized in their daily workflows.
- Obtain an overall understanding of the challenges we faced when implementing NEWS and PEWS and future opportunities to optimize, allowing learners to be better prepared should they choose to adopt these tools.

Kelsie Aitchison is a Clinical Informatics Specialist at Southlake Regional Health Centre, in Ontario, Canada. After over 10 years of working as a frontline nurse in Acute and Rehab environments, she has transitioned over to clinical informatics to share my expertise and contribute to optimizing the hospitals Health Information System. Kelsie is passionate about streamlining documentation and workflow to

allow the nurses to spend less time documenting, and more time at the bedside providing patient care, which then improves patient outcomes.

1014 - Interior Health MyHealthPortal

Track: Patient Care

Presenter: Sarah Carson

Organization: Interior Health, Kelowna, British Columbia

Scheduled: Thursday June 8 at 2:20 pm

Interior Health has been using MEDITECH's Patient Portal (branded as MyHealthPortal), to support our 3 million patients over 180 facilities since 2016. This presentation will serve to showcase our portal, as well as to explain why the portal is so essential to patient engagement. There will be an opportunity in the presentation to discuss implementation, lessons learned, and to collaborate with peers to see what is working in your portals, and what hasn't.

Learning objectives:

- Understand what patients are interested in viewing in their portal.
- Have a starting point for implementation of the portal or integrating new features of the portal.
- Make contacts with other health authorities to ease transition of services with regards to the portal.

Sarah Carson has worked in healthcare in Canada for over 20 years and is currently the Senior Analyst for the Digital Health Support Team. This team supports MEDITECH's Patient Portal, the Lab Online Booking Tool, Zoom for patients, and COVID-19 testing. Previously, she worked in REG, HIM, Patient Transport, Vocera, and Immunization.

1015 - Enterprise Decision Support using Business Clinical Analytics (BCA)

Track: Expanse

Presenters: Jason Johnson and Dr. Douglas Janowski

Organization: Willis-Knighton Health Systems, Shreveport, Louisiana

Scheduled: Thursday June 8 at 2:20 pm

Driving transformation and creating an effective data strategy requires an all-inclusive end-to-end approach across the organization. Real transformative change requires effective risk mitigation, reliable support, and sponsorship from top management, while identifying close talent-people gaps focusing on reskilling or hiring to support these new initiatives in an ever-changing technological environment.

Learning objectives:

- Define core elements to build solid foundation and collaboration – how to define goals objectives.
- How to implement strategies to mitigate risks.
- How develop criteria to ensure recruitment of qualified and reliable support.

Jason Johnson, BSN, RN, CEN, CPEN, is a Registered Nurse at Willis Knighton Health System in Shreveport, LA. Jason has been an emergency room nurse for Willis Knighton since 2016 and joined the IT Department in 2021. He is a Certified Emergency Nurse and Certified Pediatric Emergency Nurse, an instructor for the Trauma Nurse Core Curriculum, and serves on several committees for the Louisiana Emergency Nurse's Association. Jason's nursing passion is in education, both for his patients and in precepting new hire nurses into emergency nursing. In his spare time, he is an avid board game enthusiast and movie watcher. He loves to travel, especially if there is a water involved.

Douglas A. Janowski, M.D., Senior Physician Advisor – Information Technology and Clinical Integration.

1016 - Power BI Adaption Roadmap – A Journey

Track: Population Health & Analytics

Presenters: Paul Sommers and Alex Sawdo

Organization: Door County Medical Center, Sturgeon Bay, Wisconsin

Scheduled: Friday June 9 at 1:20 pm

Learn about the journey of data analytics at Door County Medical Center (DCMC) focusing on the Power BI Adaption Roadmap published by Microsoft. At DCMC, "An organizational priority in the Digital Platform is to put data in the hands of leaders to help them make informed decisions." This roadmap presents 10 data analytics areas from data culture to system oversight and the process to improve the maturity level of each area based on stated characteristics.

Discover the Power BI Adaption Roadmap to mature data analytics in the following areas: data culture, executive Sponsor, content ownership and management, content delivery scope, Center of Excellence, governance, mentoring and user enablement, community of practice, user support, and system oversight.

Learning objectives:

- Discover the Power BI Adaption Roadmap to mature data analytics.
- Identify current maturity level between 100 to 500 based on maturity level stated characteristics for each area: 100-Initial, 200-Repeatable, 300-Defined, 400-Capable, and 500-Efficient.
- Set goals for maturity improvements recognizing that maturity is a journey.

Paul Sommers is a data analytics guru with broad experience including engineering, manufacturing, banking, and healthcare.

Alex Sawdo is a data analytics protégé with recent experience across all disciplines of ambulatory and acute healthcare.

1017 - Our CommonWell Implementation Journey

Track: Interoperability/Integration

Presenters: Dr. Kristin Conley and Tina Whims

Organization: Frederick Health Hospital, Frederick, Maryland

Scheduled: Thursday June 8 at 2:20 pm

Frederick Health participated in a CommonWell Early Adopter effort in 2018, but opted not to move forward with implementation. In 2022, the team reengaged with MEDITECH to implement the toolkit. This session will share information about our experience.

Learning objectives:

- Learn basics about the CommonWell Health Alliance.
- Learn how MEDITECH has integrated CommonWell functionality in registration and clinical workflows.
- Understand current challenges experienced by the Frederick Health team when implementing CommonWell.

Dr. Conley received her medical training at the Philadelphia College of Osteopathic Medicine and completed her residency at the Naval Medical Center. She is board certified in Internal Medicine and is the Medical Director of the Frederick Health Medical Group Medical Weight Loss program. She also serves as Frederick Health's Chief Medical Information Officer.

Tina Whims is a seasoned healthcare IT professional with extensive experience implementing, managing, and supporting ambulatory information systems. She is particularly interested in projects to improve access to clinical information for patients in our care.

1018 - Ensuring Compliance with Rules & Reflex Sets

Track: Expanse

Presenter: Ed Metz

Organization: Catawba Valley Medical Center, Hickory, North Carolina

Scheduled: Thursday June 8 at 2:20 pm

Since implementing CPOE and electronic physician documentation, there are times we have struggled to gain compliance with different requirements. We have been able to gain compliance in some areas using rules and reflex sets. With the 2.1.36 update, a new feature was introduced that provided the ability to require certain orders when an order set is used.

This presentation will demonstrate popup messages and requirements used to gain compliance with using Transfer for postoperative orders, VTE assessments, proper postoperative site instructions, and preventing the Provider Group from being entered breaking the ADT feed to different vendors. After implementing the popup questions for direction, providers have easily adjusted and have asked for more guidance to obtain and maintain compliance.

Learning objectives:

- Ensure Transfer is used to place postoperative orders.
- Prevent Provider Group being entered in Consult order.

- Proper post-site instructions are loaded.

Ed Metz served in the Navy as a medic for six years and became a Registered Nurse in 2005, specializing in orthopedics. Assisting with the migration from Magic to 6.08, informatics soon became his passion. Ed trains providers as they begin their journey at the facility, providing support in many different facets including eRx, voice to text software support, device integration, order set development, and troubleshooting device issues.

1019 - Improved 340B Compliance with Free Drug Programs

Track: Other

Presenter: Stephen Briggs

Organization: Catawba Valley Health System, Hickory, North Carolina

Scheduled: Friday June 9 at 10:10 am



The 340B program is a vital lifeline to qualifying organizations. Compliance to 340B regulations is difficult and can be complicated when patients are utilizing free drugs from manufacturer patient assistance programs. This presentation reviews a proposed workflow that allows for free drug use and maintains 340B compliance.

Learning objectives:

- Understand important aspect of 340B
- Describe a free drug workflow that allows for 340B compliance
- Build/Utilize
 - Query
 - Screen
 - Rules
 - Fragments
- Encourage discussion

Stephen Briggs completed his BS in Biology at Western Carolina University and Doctor of Pharmacy at Wingate University. He has worked at Catawba Valley Medical Center in Hickory NC for the past 10 years. During his time at CVMC, her has worked as a Staff Pharmacist, Clinical Pharmacist, and Informatics Pharmacist.

1020 - Compare and Contrast: A Journey to Document Contrast on the MAR

Track: Patient Care

Presenters: Carlos Cuellar and Kelli Griffith

Organization: Peterson Regional Medical Center, Kerrville, Texas

Scheduled: Thursday June 8 at 2:20 pm



The presentation acts as a follow-up to our previous year's presentation. It will describe our journey as we expanded documentation of radiologic contrast on the MAR to include nuclear medicine, ECHO

cardiograms and swallow studies. We will update changes made to our previous processes and lessons learned.

Learning objectives:

- Describe why facilities should consider documenting radiologic contrast on the Medication Administration Record.
- Identify at least three workflows that increase patient safety.
- Define how this system can positively influence radiologic contrast management.

Carlos Cuellar has been employed with Peterson Health since 1998, implemented Magic ITS and became PACS Administrator and ITS Module Coordinator in 2004. Carlos assisted with major MEDITECH projects including transition from Magic to 6.x in 2010 and Expanse migration in 2019. Carlos also served as Project Manager for hospital third-party integrations with voice recognition solution, Dragon Medical One (2016), and secure messaging solution, PatientTouch Communications (2017). Carlos officially joined the IT department in 2019 as an IT Interface Analyst while continuing PACS Administrator responsibilities for the facility.

Kelli Griffith is the Assistant Director of Pharmacy at Peterson Regional Medical Center. Dr. Griffith has been in practice for 17 years, and has experience in the critical care setting, administration, and informatics. She serves on the Peterson Health Pharmacy and Therapeutics, Antibiotic Stewardship, Infection Prevention, Controlled Substance Diversion and Medication Management committees. Dr. Griffith has her Black Belt in Lean Six Sigma. She received her Doctor of Pharmacy degree from Texas Tech University Health Sciences Center in 2005.

1021 - Data Repository: When M-AT and NPR Just Don't Cut It (Lessons Learned since 2015)

Track: Population Health & Analytics

Presenter: Jay Gilmore

Organization: Phoebe Putney Health System, Albany, Georgia

Scheduled: Thursday June 8 at 2:20 pm

This presentation will cover lessons learned with Data Repository since our 2015 go-live. See the different ways to locate M-AT and NPR data for writing data out of Data Repository's SQL server.

Learning objectives:

- Learners will see the different ways to locate M-AT and NPR data for writing data out of DR's SQL server.
- Learners will see when data is unavailable in DR. A case study from our environment will be used and explained during this presentation.
- Learners will see when DR tables are advised to be turned off or placed on a secondary queue for updating SQL.

Jay Gilmore is a Programmer Analyst at Phoebe Putney Health System. He started his MEDITECH career as a Materials Management end user on the Magic platform at his previous hospital. He wrote reports using NPR Report Writer, implemented SCA and ORM, and co-implemented EDM, BMV, and ITS for

Magic. In 2011, Jay joined Phoebe Sumter Medical Center, who was using MEDITECH's Client/Server platform. Phoebe Worth Medical Center joined this Client/Server environment in 2012 before all three Phoebe hospitals migrated to 6.x in October 2015. He has supported the Data Repository application since this time and writes reports and extracts out of NPR Report Writer, M-AT Report Designer, and SQL. Phoebe went live with Expanse 2.1 in June 2021.

1022 - Creation of a Shared Services Model – CARE4 Lessons Learned

Track: Leadership & Culture

Presenter: Andrea Partridge

Organization: Royal Victoria Regional Health Centre, Barrie, Ontario

Scheduled: Thursday June 8 at 2:20 pm



The CARE4 project went live September 2021 on nearly all Expanse modules, across four hospitals at once. One year later, we are starting to hit our stride on how to govern and continuously improve our shared CIS. Explore the CARE4 project and IT Partnership lessons learned as they were creating a shared services model.

Learning objectives:

- Define operational services.
- Define options for digital health partnership models.
- Improve partnerships.

Andrea Partridge's involvement in Clinical Informatics in Acute Care spans a couple of decades. She is the Regional Clinical Informatics & Applications Manager for Advanced Clinicals at Royal Victoria Regional Health Centre in Barrie, Ontario, Canada. This role supports Collingwood General and Marine Hospital, Georgian Bay General Hospital, and Headwaters Healthcare Centre with our single instance of Meditech Expanse. She is a Registered Nurse with decades of experience, holds a Masters in Leadership, and is APMG Change Management Practitioner. Andrea is the past recipient of the Ontario Nursing Informatics Achievement Award and the recipient of the RVH Award of Excellence. Andrea is presenting the Shared Services Model used in the Regional work she is involved in.

1023 - Oncology: How Did We Get There?

Track: Patient Care

Presenter: Amy Lipford

Organization: Ozarks Healthcare, West Plains, Missouri

Scheduled: Saturday June 10 at 9:20 am

We will provide an overview of what we learned with the implementation of ONC at Ozarks Healthcare, and the required IT support subsequently. We will discuss the core team, how it works, and what might have worked better. Learn about the build: scheduling/reg (which need careful consideration), treatment plans, AMB vs Acute workflows. We will talk about what we did for pre-live, go-live, and how we supported the live system and changes we have made since.

Learning objectives:

- Learners will understand the need for a solid core team and how to pick this team.
- Learners will see/understand how REG/SCH of these patients will drive most workflows for the ONC module and treatment plans.
- Learners will come away with our lessons learned and a plan for avoiding the same mistakes.

Amy Lipford is a Registered Nurse and Applications Analyst III working at Ozarks Healthcare. She has been with the organization almost 20 years; 10 of them in her current role. She assisted in the go-live of nursing documentation (PCS), and was the lead analyst in bringing up eMAR and BMV. Amy was the core team lead for PCS in the move to Expanse and the ONC implementation. Between these projects, she led a charge capture team working to find missing revenue in departments and streamline capture into documentation.

1024 - Creating an Integrated Electronic Referrals Ecosystem

Track: Interoperability/Integration

Presenter: Sam Fielding

Organization: Southlake Regional Health Centre, Newmarket, Ontario

Scheduled: Thursday June 8 at 3:10 pm



Across Ontario, there is diverse number of systems and there is a requirement to operate as an integrated system. Electronic referrals are often the entry point for patients and these patients ultimately end up at a clinic, service, or surgery at our hospital. Southlake has been actively pursuing an integrated electronic referral strategy with MEDITECH and other partners. Along this journey, we have encountered successes, challenges, and some problems that have not yet been solved. We want to share our approach, vision, and lessons learned. We know that some of our experiences are directly applicable across organizations and international borders.

Learning objectives:

- Lessons learned from an ongoing journey to implement electronic referrals.
- Understand how MEDITECH is integrating into a provincial electronic referral ecosystem.
- Envision the strategic outcome as a portfolio of initiatives that build on each other.

Sam Fielding is the Chief Information Officer at Southlake Regional Health Centre. His scope of responsibilities includes Information Technology, Patient Registration and Scheduling, Health Information Services, Telecommunications and Switchboard.

Prior to joining Southlake, Sam was the Chief Technology Officer at Horizon Health Network for over 10 years when the New Brunswick health system underwent significant transformation with the merging of health authorities and the creation of a healthcare shared services agency. He has held several other roles in both the public and private sectors including Business Transformation, Project Management and Consulting. He has his Project Management Professional (PMP) designation and has experience in both change management and process redesign. His formal education background includes a Bachelor of Business Administration (Honours) degree from Acadia University, an Applied Information Technology diploma, and his Master of Business of Administration from the Université de Moncton. Sam is currently a Director of MUSE International organization.

1025 - Implementing Quality Standards for Alcohol Use Disorder in a Mental Health Care Facility

Track: Expanse

Presenter: Sandy Allen

Organization: Ontario Shores Centre for Mental Health Sciences, Whitby, Ontario

Scheduled: Friday June 9 at 9:20 am



Background: A comprehensive evaluative report by the Institute for Clinical Evaluative Sciences (ICES) and Public Health Ontario (PHO) in 2012 found that alcohol use disorders are among the five mental health conditions that have the highest burden of illness in Ontario, contributing to 88% of total deaths and 91% of years of life lost due premature mortality between 2005-2007¹. Alcohol use disorders are also linked to a number of medical comorbidities, such as an increased risk of trauma secondary to motor vehicle accidents, heart disease, stroke, and type 2 diabetes¹. These findings highlight the serious negative consequences of alcohol use disorders and emphasize the need for better quality mental health care, such as early detection and timely treatment strategies to reduce the burden of illness. Ontario Health (Quality) created the Quality Standards for Problematic Alcohol Use and Alcohol Use Disorder to outline what high-quality care looks like for patients with alcohol use disorders and how it should be delivered to reduce gaps and variations in care². This quality standard is also based upon the principles of recovery, harm reduction, and considerations for cultural context and trauma experienced². In alignment with the hospital's recovery and patient-centered approach in mental health care, Ontario Shores implemented some of the statements from the Quality Standards for Problematic Alcohol Use and Alcohol Use Disorder¹ on January 2021 in both inpatient and outpatient settings.

Objectives: The purpose of this presentation is to discuss how the statements from the Quality Standards for Problematic Alcohol Use and Alcohol Use Disorder can be implemented by using the various functionalities of the MEDITECH Expanse EMR and how to monitor adherence to the principles of the quality standard.

Methods/Approach: Process indicators outlined by Ontario Health (Quality)² were used to measure improvement for each quality standard statement. The World Health Organization (WHO) risk drinking levels³ were used to measure initial and subsequent assessments of the patient's alcohol use in response to the interventions provided by their Most Responsible Providers (MRPs). A process workflow map was created to visualize the overall scope and EMR requirements of this initiative, which includes: (1) screening using the AUDIT-C for potential problematic alcohol use; (2) in-depth exploration of problematic alcohol use using the full AUDIT-C; (3) calculation of level of harm using the WHO risk drinking level to measure baseline and outcomes of interventions; (4) documentation based on risk of harm that guides MRPs in delivering interventions (i.e., brief intervention [education], medications, and/or referrals) to their patients appropriate to their alcohol use risk level; (5) comprehensive order sets for medications; (6) a reminder system to ensure completion of screening and documentation within the recommended timeframes.

Outcomes and Next Steps: Improvements in the MEDITECH build are ongoing, based on feedback from MRPs and clinicians. The interdisciplinary working group overseeing the implementation of the Quality Standards are flagging some data quality issues and discussing strategies on how to resolve them: (1) increasing end-user capacity to switch document templates when reminders pop up; (2) triggering follow-up outcome assessments after interventions; (3) measuring cravings as an alternate outcome measure for patients who have reduced drinking or have no access to alcohol.

Learning objectives:

- Understand what alcohol use disorders are, its impact on population health, and the importance of developing population-based screening and treatment strategies.
- Define what the Quality Standards for Problematic Alcohol Use and Alcohol Use Disorder are and how overall success of interventions can be measured.
- Discuss how MEDITECH Expanse EMR functionalities can be leveraged to support the implementation, delivery, and monitoring of interventions offered and provided to patients with Problematic Alcohol Use or Alcohol Use Disorder.

References:

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2. Problematic Alcohol Use and Alcohol Use Disorder Care for People 15 Years of Age and Older. Toronto (ON): Ontario Health (Quality); c2020. <https://www.hqontario.ca/evidence-to-improve-care/quality-standards/view-all-quality-standards/problematic-alcohol-use-and-alcohol-use-disorder>
3. Witkiewitz K., et al. (2017). Clinical validation of reduced alcohol consumption after treatment for alcohol dependence using the World Health Organization risk drinking levels. *Alcohol Clin Exp Res.* 41(1):179-86.

Sandy Allen is a Clinical Informatics Analyst at Ontario Shores Centre for Mental Health Sciences and for the Mental Health Cluster (in partnership with Royal Ottawa Mental Health Centre and Waypoint Centre for Mental Health Care). She is currently in her fourth year of working in Clinical Informatics, focusing primarily on clinical documentation modules (PDoc, IDM and EMR) and physician workflow and processes. With seven years of experience in Acute Care as a Registered Nurse, Sandy understands the complexities of providing patient care and how electronic medical records have the potential to improve the workflows of health care professionals.

1026 - Sepsis Alert – Our Journey

Track: Patient Care

Presenter: Reece Perigin

Organization: Palo Pinto General Hospital, Mineral Wells, Texas

Scheduled: Saturday June 10 at 8:30 am



Palo Pinto General Hospital went live the 6.1 in 2017 and used best practice build criteria for sepsis based on SIRS and documentation of vital signs. In 2022, we automated vital signs from monitors in all areas. This resulted in nursing no longer having to go to vital signs for manual entry and broke the best practice model. We decided to use surveillance and a documentation redesign to identify patients that we needed review.

This presentation will explore:

- Old process based on best practice from MEDITECH and our struggles.
- How we developed our Sepsis Alert surveillance and associated policy.
- What changes were made to documentation both in PCS and PCM to help with flow.
- Training and calling a sepsis alert and tools we provided our clinicians.

Learning objectives:

- Identify available options for the use of surveillance in monitoring sepsis.
- Describe process changes needed, and able to identify which team members need to be at the table.
- Discuss documentation requirements for Sepsis and available options, including difference between Sepsis 2 and Sepsis 3 guidelines.

Reece Perigin RN, Clinical Analyst at Palo Pinto General Hospital, has over 30 years experience with MEDITECH starting with Magic to CS to 6.X to Expanse, and has special interest in Quality, Patient Care and Ambulatory. He has previously presented MUSE on a variety of topics.

1028 - Patient Portal: Best Practices, Lessons Learned, and Pain Points

Track: Expanse

Presenters: Kimberly Burttt and Robin Adams

Organization: Huron Consulting Group

Scheduled: Thursday June 8 at 3:10 pm

Patient health portals are an essential part of an organization's Digital Front Door and have become a foundational avenue to digitally support patient consumerism, increase satisfaction and improve health outcomes. They help healthcare organizations of all sizes and specialties to better engage with their patients facilitating enhanced patient safety, medication adherence, and increased revenue capture. In addition, they can increase efficiency and streamline workflows.

MEDITECH's Patient and Consumer Health Portal provides an extensive array of functionalities to support patients' empowerment of their health. In addition, it seamlessly integrates into the EHR for efficient use for healthcare organizations' front-end, clinical, and revenue cycle teams. We will take you through the best practices provided by MEDITECH and other implementations, lessons learned for next time while implementing MEDITECH's Patient and Consumer Health Portal and pain points identified for consideration. This knowledge can help all areas of your organization ensure that the patient portal is implemented with optimal use and ease for your staff and patients.

Join us to learn how to make the most of the patient portal and mitigate the challenges.

Learning objectives:

- Identify best practices to building the patient portal to optimize the value-added benefits for the staff and patients.
- Find out about lessons learned from other implementations to avoid the same challenges in your patient portal implementation.
- Consider pain points discussed to help mitigate challenges ahead of time.

Kimberly Burttt, RHIA, CHPS, Healthcare Tech Senior Manager, has 25 years experience in health information management & compliance leadership; 18 years operating and managing projects within the MEDITECH space; and 12 years healthcare information technology consulting.

Robin Adams, MEd, MA., Manager, has 28 years experience in healthcare information technology; 25 years MEDITECH support, education development and implementation; and 25 years revenue cycle, patient access, and health Information management experience.

1029 - Expanse and Medical Imaging – Improving Patient Safety

Track: Patient Care

Presenters: Kathryn VanHemme and Lily Lee

Organization: Royal Victoria Regional Health Centre, Barrie, Ontario

Scheduled: Saturday June 10 at 9:20 am

Introduction: This quality improvement initiative sought to launch MEDITECH Expanse and Provider Order Entry throughout the Medical Imaging department of a regional acute care facility to improve interprofessional communication, information sharing and patient safety.

Objective: Improve patient care by developing a hybrid process that utilizes Expanse functionality with the process between the Medical Imaging department and Inpatient Units of an acute care facility.

Methods: In September 2021, MEDITECH Expanse and Provider Order Entry went 'live' in most areas of the hospital except in the complex and dynamic Medical Imaging department. This regional Medical Imaging department has multiple modalities, and each modality has individual and unique processes and needs to accommodate both inpatient and outpatient processes. Much of the Medical Imaging processes remained the same as before 'Go-Live'. Almost immediately after 'Go-Live' however safety concerns were identified. Paper communication between the Medical Imaging department and the inpatient units was no longer working. Inpatient nurses were no longer even thinking about a paper chart to access additional information or seek order recommendations. An order entry 'tug-of-war' ensued about who would be entering the typical preparation and post care orders for Medical Imaging inpatients. We needed a hybrid process to bridge the gap between the PACS and paper process of the Medical Imaging Interdepartmental and the Expanse Inpatient process. It appears the incorporation of Expanse in Medical Imaging departments across the country is limited. So began our journey to bring Expanse into the hybrid process of our Medical Imaging department to enhance safe and efficient care transitions between the inpatient and Medical Imaging department.

Results: Thus far, this quality improvement initiative has required over 100 hours of collaboration of Professional Practice, Medical Imaging MRT Experts, Expanse clinical analysts, Physician and Radiologist stakeholders, Project lead and support of senior leadership. Medical Imaging Medical directive 'Go-Live' will be April 2023 with order set phase of the project projected to 'Go-Live' in July 2023.

Conclusion: Approximately three quarters through this build, early learnings and development of build processes have resulted in overcoming some barriers and increasing productivity of the project.

Learning objectives:

- Identify at least three processes that improve the safety of the patient.
- Describe a hybrid approach that bridges the two worlds of Medical Imaging and the admitted patient.
- Identify at least three process that improve interdepartmental communication.

Kathryn VanHemme, Coordinator Professional Practice Expanse Support Team, is a baccalaureate prepared Registered Nurse with most of her experience in Critical Care, Emergency Nursing and Education. Kathryn joined RVH in 2015 as a front-line RN. In 2017, Kathryn transitioned into Professional Practice as the Clinical Nurse Educator for ICU and Medical Imaging Department. Kathryn was involved in MEDITECH Expanse as a Train the Trainer to train the Expanse tool to Super Users and front-line users before Go-Live in September 2021. She is dedicated to optimizing Expanse at RVH to promote safety for our patients and end-users while meeting best practices and being efficient.

Lily Lee first graduated from Toronto Metropolitan University (formerly known as Ryerson University) in 2010. After moving to Barrie in 2013, she joined RVH as a front-line nurse in the In-patient Surgical program (Surgery #3/Surgical Step-down Unit) for about seven years. In 2020, she transitioned to the growing Cardiac Program, the Cardiac Intervention Unit. Her work has led to this opportunity to support her colleagues from a professional practice perspective. Lily transitioned to the Professional Practice Expanse Support Team PCS Lead in September 2022 to help support Expanse Optimization.

1030 - Leveraging Technology to Optimize Outcomes for Patients in Acute Alcohol Withdrawal

Track: Patient Care

Presenters: Nan Cleator and Barbara Jones

Organization: Waypoint Centre for Mental Health Care, Penetanguishene, Ontario

Scheduled: Thursday June 8 at 3:10 pm



Patients who regularly consume a large amount of alcohol and abruptly discontinue its use because of hospitalization can develop serious acute alcohol withdrawal (AAW) during their inpatient stay. Severe AAW, if not recognized early and effectively managed can lead to the potentially life-threatening conditions such as withdrawal seizures, alcoholic hallucinosis and delirium tremens. Patients at risk of serious AAW are not always obvious because patients may not disclose the extent of their alcohol use and their symptoms may be masked by co-morbid medical or mental health conditions.

In our tertiary mental health care centre, early identification, and effective management of patients in AAW was more complex and challenging due to a number of factors. We identified a need for a more standardized, coordinated, and evidence-informed approach to optimize patient outcomes and to reduce risks. The Professional Practice team was engaged to collaborate with the Medical Team on an Acute Alcohol Withdrawal Protocol/Pathway to standardize the care for this specific population. A protocol/care pathway defines what happens, when it happens, and who is responsible at each stage.

Attend this session to learn about our processes and how we designed and implemented various creative technology solutions.

Learning objectives:

- Identify a multi-pronged technology strategy to support the interdisciplinary team in providing safe and effective care to optimize patient outcomes and to reduce risks.
- Apply automation strategies in the EHR that supports nurses to provide the right care/treatments at the right time, to the right patient, based on their clinical presentation without delay.
- Incorporate innovative, focused nursing intervention that identifies care plans, assessments, and care interventions all in one place. Describe the nursing competency learning resources that will

facilitate the implementation of the technology innovations and practice changes to support Nurses in providing safe and effective patient care.

Nan Cleator is a Registered Nurse and has been a Professional Practice leader for over 20 years. She has extensive experience in engaging stakeholders in a dynamic process to address practice issues and needs, which results in solutions that are relevant to real life practice situations. In her current role in Professional Practice at a tertiary Mental Health Care facility, she is the lead on the Integrated Care Strategy to support the provision of holistic care to meet physical and mental care needs of patients.

Barbara Jones has been a professional practice leader for almost two decades. She has a passion for supporting direct care practitioners, and teams to achieve their potential for excellence in practice. Barb is a Registered Nurse with a Bachelor of Science in Nursing, a Master's in Worldview Studies and a Master of Science. She is also a PROSCI certified change practitioner, and a Qualified Mediator, and she makes great bread & butter pickles.

1031 - Surgery Services (SUR): Tips and Tricks

Track: Expanse

Presenters: Melisa Gregorio and Eric Moreno

Organization: Fraser Health, Surrey, British Columbia

Scheduled: Saturday June 10 at 9:20 am

On April 15, 2023, Fraser Health went live with Expanse (2.2; PP 39, from Client Server). We will share the tips and tricks we learned during our design, build, implementation, and evaluation of SUR, which include, but are not limited to: how to build Trackers in Web (2.2) vs Desktop (2.1), how to design and build menus, access, and procedures for SUR users, and helpful processes for the creation and delivery of education for clinicians, as well as Clinical Informatics staff (ex. if these Clinical Information Specialists are new to Expanse).

Learning objectives:

- Discuss several key differences between the SUR module in 2.1 vs 2.2 (Trackers focus).
- Describe the strategies used to manage menu, access, and procedures (MPAs) for SUR.
- Obtain the knowledge of at least three tips for optimizing SUR education.

Melisa Gregorio is a Registered Nurse and Clinical Information Specialist at Fraser Health (FH). She joined FH in 2004 and worked in Surgery, Critical Care, Access and Utilization, and medicine (Clinical Educator). She joined the Clinical Informatics program in 2015 and has combined her educator experience, clinical knowledge, and passion for teaching, to contribute to supporting and advancing practice. Melisa joined the Expanse (SUR) team at FH in 2021.

Eric Moreno is a PMP certified Portfolio Manager. He joined FH in 2015 and worked in a variety of roles supporting different health care information systems, including MEDITECH Client Server. In 2018, he was the technical project lead for the implementation of perioperative eDocumentation in C/S. In 2020, he became the technical lead for the Expanse SUR team and is very excited that FH has implemented Expanse.

1032 - Electronic Signature from Chaos to Consistency

Track: Patient Engagement

Presenter: Michelle Wetzel

Organization: Ozarks Healthcare, West Plains, Missouri

Scheduled: Saturday June 10 at 8:30 am

Inefficient technology and paper-based forms were causing chaos at Ozarks Healthcare. After considering multiple EHR vendors, we selected MEDITECH Expanse as our platform of choice, along with a global eSignature solution that has a tight integration inside MEDITECH. This not only allowed for connected care and consistent processes, but also eliminated paper, lost forms, and errors. Patients now have a streamlined, faster, and more intuitive registration process, saving five minutes per registration. The use of iPads for consents added mobility for team members and extended patient care. Ozarks has seen tremendous improvements, but this is only the beginning as they aspire to expand eSignature solutions to patients for informed consents and connect the eSignature ability directly to patient smartphones. Attend this session to learn how Ozarks Healthcare transformed their patient registration process and improved patient experience with MEDITECH Expanse and a global eSignature solution.

Learning objectives:

- Discover how Ozarks Healthcare transformed their patient registration process with a single EHR platform and a global eSignature solution.
- Learn how Ozarks Healthcare improved patient experience by eliminating paper, lost forms, and errors in their registration process.
- Gain insights from Ozarks Healthcare on the lessons learned from their successful implementation of a global eSignature solution and how they overcame any challenges, so that other hospitals can learn from their successes and mistakes.

Michelle Wetzel is an Application Analyst at Ozarks Healthcare, bringing almost 14 years of experience to the role. With a primary focus on supporting the HIM and Abstracting/Coding modules in Expanse for both Ambulatory and Acute care settings, Michelle played a crucial role in Ozarks' successful implementation of a global eSignature solution and single EHR platform, resulting in improved patient experience and increased efficiency.

1033 - Cardiac Integration with Expanse

Track: Interoperability/Integration

Presenter: Lisa Harris

Organization: Royal Victoria Regional Health Centre, Barrie, Ontario

Scheduled: Thursday June 8 at 1:30 pm

This presentation will showcase the interoperability within Expanse to integrate multiple modalities related to cardiac care in an acute care facility in Canada. Learn about the value of integration for patients and clinicians, wins, challenges, and components of Expanse that we use.

Learning objectives:

- Increase learner knowledge on how to decrease the length of time for patients and providers receiving diagnostic results which expedites patient care.

- Improve analyst knowledge of the interoperability and techniques used within Expanse to fully integrate with different vendor systems.
- Showcase to learner steps used to integrate with different vendors so that fellow learners are able to implement similar workflows at their facilities to improve patient care by increasing efficiency and decreased timing for diagnostic reporting being available for providers in Expanse.

Lisa Harris, RN, Clinical Informatics Specialist, has nursing experience working in Emergency Departments in downtown Toronto and Barrie for over 13 years. She has informatics experience for seven years including MEDITECH versions 5.66, 5.67 and Expanse, and experience with multiple modules in Expanse and integration with cardiac modalities.

1034 - Implementing SDOH Measures within MEDITECH Admission Workflows

Track: Business Intelligence, Quality Management and Reporting

Presenters: Jodie Franzen and Pam Feeler

Organizations: Duncan Regional Hospital (DRH) Health, Duncan, Oklahoma; Medisolv

Scheduled: Friday June 9 at 2:10 pm

We will share the steps the health system has taken to successfully incorporate CMS's new soon-to-be-mandated Social Drivers of Health (SDOH) measures into its MEDITECH Expanse EHR platform. In this presentation, we will review the new CMS equitable care measures – Hospital Commitment to Health Equity (HCHE), Screening for Social Drivers of Health (SDOH-1) and Screen Positive Rate for Social Drivers of Health (SDOH-2) – and considerations for mapping this data within MEDITECH EHRs.

We will provide an overview of the process DRH Health used to develop its SDOH questionnaire and build these questions within its MEDITECH admission workflows at its two regional hospitals. We will address the timeline of implementation, including milestones already achieved and the next steps of the rollout; challenges and concerns encountered along the way; and what DRH Health is already learning from the data it is collecting.

The target audience for this presentation will be hospital managers, CIOs, and others responsible for ensuring MEDITECH EHRs are integrated with CMS reporting mandates, including the new SDOH measures. The case study presented will be especially relevant to those with health systems comprised of multiple hospitals and/or ambulatory centers, and those located within rural communities.

Learning objectives:

- Understand the process of building questions into MEDITECH admission workflows to capture the two new SDOH measures required by CMS: SDOH-1 and SDOH-2.
- Be prepared to establish new procedures for when patients answer “yes” to any of the SDOH questions and compile local resources that can address these needs.
- Advise staff on how to ask these sensitive questions and account for patients who are hesitant and/or unwilling to answer them.

Jodie Franzen has been the Director of Performance Excellence at Duncan Regional Hospital (DRH) Health since 2016. In this role, she oversees DRH Health's use of the MEDITECH Expanse EHR. DRH Health is a not-for-profit regional system consisting of two hospitals and 20 provider clinics in southern Oklahoma.

Pam Feeler is the Clinical Quality Advisor with Medisolv and assisted with the implementation of the SDOH questionnaire within DRH Health's MEDITECH EHR.

1035 - Expansive Preparation for Go Live – A Colorful MEDITECH Expansive Pharmacy Journey

Track: Expansive

Presenters: William S. Cooper and Risa C. Rahm

Organization: HCA Healthcare, Nashville, Tennessee

Scheduled: Friday June 9 at 1:20 pm



Preparing for a large multi-hospital implementation of a new EHR can be overwhelming. When HCA Healthcare determined to move from MEDITECH Magic to Expansive support teams had to quickly identify a process to allow collaboration with the subject matter experts at the facility, division, and corporate level to achieve this goal. Three alpha pilot sites were identified to test process and assess needed change as part of the preparation for six beta pilots and future waves. As a 180+ hospital system, a holistic enterprise approach was central to moving forward, including representatives from all divisions, while ensuring that the alpha sites had what was needed to continue excellent care for patients. To support the colorful vision and obtain input and expertise from across the company, several teams were created and given code names based on colors. Join us as we walk through our process and share our journey over the rainbow.

Learning objectives:

- Understand a transitional journey from MEDITECH Magic to Expansive Cloud for a large multi-hospital healthcare system.
- Detail preparation steps and forecasting that was critical to a GO LIVE.
- Discuss pathfinding for future Expansive implementations.

Dr. Cooper received his Bachelor of Science degree in Biochemistry from Lee University and his Doctor of Pharmacy degree from Union University School of Pharmacy. He completed his Post-Graduate Year 1 Pharmacy residency at North Mississippi Medical Center and went on to complete a Post-Graduate Year 2 Pharmacy Informatics residency at the HCA Healthcare corporate offices through the University of Tennessee. Dr. Cooper joined the HCA Clinical Services Group's Pharmacy Informatics Team as a Medication Management & Clinical Pharmacy Informatics Manager. His primary and most enjoyed areas of work are related to Clinical Decisions Support tools, enterprise change management, Residency Selection Committee Chair activities, and pharmacy research.

Risa C. Rahm, Pharm.D., CPHIMS, CPPS is the Sr. Director of Medication Management and Clinical Pharmacy Informatics for HCA Healthcare in Nashville, Tennessee. Dr. Rahm provides leadership for enterprise-wide adoption for multiple EHR projects including Promoting Interoperability, ePrescribe, medication reconciliation, and CPOE. She leads numerous projects in the medication management informatics space across the enterprise. Dr. Rahm received her Doctor of Pharmacy degree from Mercer University College of Pharmacy in Atlanta, GA. and is CPHIMS certified. Prior to joining the HCA Clinical Operations Group in a clinical pharmacy informatics role, she held multiple positions in HCA, including Clinical Supervisor, Director of Pharmacy, Division Director of Pharmacy, and Corporate Director of Pharmacy Operations. Dr. Rahm is also the Residency Program Coordinator for the ASHP-accredited PGY2 Pharmacy Informatics Residency.

1036 - Patients as Consumers

Track: Leadership & Culture

Presenter: Jonathan Moores

Organization: Citizens Memorial Hospital, Bolivar, Missouri

Scheduled: Thursday June 8 at 1:30 pm



There is no better time to be a part of the healthcare industry than today! Healthcare consumerism is taking hold and converting our outdated care model and turning it into an approachable, convenient, patient first model – all during a time when our patients need it the most. Please join us to learn the three key areas where healthcare consumerism is taking hold: Transparency, Convenience of Care, and Patient Empowerment.

Learning objectives:

- Learn how you can address healthcare consumerism from a pro-active approach.
- Implement tools MEDITECH has in place today to give patients more transparency, convenience of care, and empowerment.
- Rock the boat – break consumers out from the stagnant healthcare model.

Jonathan Moores, Network and Support Manager at Citizens Memorial Hospital, has worked in healthcare IT for 14 years. Of that time, he has been part of several innovative projects that have allowed us to re-think how we can deliver healthcare and better serve our patients and community.

1037 - Incident Response Program Maturity: How to Prepare for the Worst Day Ever

Track: Support & Technology

Presenter: Russell Teague

Organization: Fortified Health Security

Scheduled: Thursday June 8 at 2:20 pm



According to the HHS Office for Civil Rights (OCR) data breach portal, healthcare providers represent the majority of breaches reported, accounting for 70% of all cybersecurity incidents in 2022. The reality for cybersecurity teams in healthcare is it's not an "IF" an attack will happen, but rather "WHEN" it will happen, and are you properly prepared? Join us to learn the tools and techniques you need to prepare and be proactive in your cybersecurity preparedness. The difference between a successful Incident Response (IR) program and one that exaggerates an incident comes in preparation for a "Worst Day Ever." Listen to our speakers as they share their decades of experience helping healthcare organizations build efficient and cost-effective IR programs.

Learning objectives:

- What to expect during an Incident Response (IR) scenario and identify the elements that enable a successful IR program.
- Defining what makes a "Good" IR program.
- How to apply lessons learned against the current threat landscape and identifying post-incident considerations you must focus on.

Russell Teague, Vice President, Advisory & Threat Operations at Fortified Health Security, is a senior business leader with more than 25 years of cybersecurity experience spanning U.S. Army Intelligence and Security Command, IT cybersecurity maturity, and Information Protection. His extensive background spans various industries, including healthcare, pharma, life science, finance, retail, technology, manufacturing, and oil & gas sectors.

1038 - Expanse Acute Hold Queue and All That Goes With It

Track: Expanse

Presenter: Kim Knoup

Organization: Healthcare Triangle

Scheduled: Thursday June 8 at 1:30 pm

The Expanse Acute Hold Queue routine has multiple layers of functionality that can be used to allow providers to be efficient, patients to be satisfied with decreased delays and adverse issues, and staff to be prepared for patient arrival before an account is created. The ability to enter orders from ambulatory and acute to manage orders from pre-admission to discharge allows for effectiveness in patient care, with the ultimate result of satisfaction for providers, patients, and staff. Understanding the functionality of the acute hold queue, involving the ambulatory orders and order groups within the hold queue, as well as the integration of manage transfer can be complex. Taking the time to learn the full functionality for different workflows can decrease challenges presented to providers and staff.

Learning objectives:

- Gain insight into the acute hold queue workflow options from pre-admission to discharge
- Understand how to use order groups within an event for efficiency to provider to enter groups of orders throughout the stay within one event
- Understand the integration of acute hold queue and manage transfer

Kim Knoup has been a Senior Consultant with Healthcare Triangle for over four years with 25+ years of healthcare experience. She has been working in informatics leadership for over 10 years. Kim has implemented Expanse as well as done 6.15 to Expanse updates for multiple clients. She enjoys working closely with providers and nurses to improve workflow processes with Expanse.

1039 - Reimagine Data Repository Reports with Microsoft Power BI

Track: Business Intelligence, Quality Management and Reporting

Presenter: Ian Proffer

Organization: Acmeaware, Inc

Scheduled: Friday June 9 at 2:10 pm

What is Microsoft Power BI? In this educational session, we'll introduce the latest data visualization and reporting services and applications offered by Microsoft. With Power BI you can easily and quickly see not just MEDITECH Data Repository information, but data from across or even outside your enterprise, making collaboration easy and decision-making fast.

We'll provide an overview of the Power BI applications and services and explore how to use them with MEDITECH Data Repository. We'll see real dashboard and report examples from facilities using the MEDITECH EHR to see how their IT departments are already using Power BI to share and analyze data. Come and learn how easy it is with Power BI to see your data in a whole new way, using dynamic, interactive reports and dashboards, empowering your users to perform their own analytics.

Don't miss this opportunity to learn how Power BI enables the best analytics from the MEDITECH EHR.

Learning objectives:

- Knowledge of the Microsoft Power BI platform and tools.
- The challenges and considerations for using Power BI with Data Repository.
- How to reimagine traditional Data Repository reporting in a whole new way.

Ian Proffer is AcmeWare's Director of Communication and Training. Before joining AcmeWare in 2007, he spent seven years in healthcare IT at Jefferson Healthcare in Port Townsend, WA (a MEDITECH C/S site) and Harborview Medical Center in Seattle. Ian has worked for the last 20 years as a consultant, report writer, database analyst, administrator, and architect, including four years at Microsoft Corp. His practical work experience in healthcare includes database analysis and administration, report and application authoring and development, and user education and training.

1040 - Best Practices for Securing Healthcare IT Across Public, Private, and Cloud Edge Environments

Track: Support & Technology

Presenters: Tim Quigley, John Gomez, Matt Donahue, and Eric Gasser

Organization: CloudWave; Wooster Community Hospital Health System, Wooster, Ohio

Scheduled: Thursday June 8 at 3:10 pm



Protecting systems from the growing number of cyberattacks is a major challenge for healthcare organizations, especially in light of the complexity of healthcare networks and systems. The push to digitize healthcare operations and adopt new technologies to improve patient care has created new vulnerabilities and attack surfaces. For example, the use of IoT (Internet of Things) devices in healthcare can create new attack vectors for cybercriminals.

Taking a defense-in-depth approach to your IT security provides layered protection across IT operations to protect sensitive data. Join us to gain an understanding of security vulnerabilities across the cloud, data center edge, network, and beyond, and hear how to address them.

Learn how leveraging the cloud can exponentially increase your odds of thwarting cybersecurity threats while meeting compliance requirements. Managed and immutable backup services and cloud-based disaster recovery solutions, combined with a holistic approach to cybersecurity across the multi-cloud environment can provide ultimate, end-to-end protection for your hospital IT operations and patient data.

Join us for a panel discussion to examine the current cybersecurity threat landscape in healthcare and assess a variety of strategies to prevent a cyber event.

Learning objectives:

- Gain an understanding of security vulnerabilities that may be present across the cloud, data center edge, network, and medical device environments.
- Learn ways the cloud can be used to improve your security stance and meet compliance requirements.
- Understand how taking a holistic approach to cybersecurity ensures end-to-end protection for your hospital IT operations and patient data.

Moderator: Tim Quigley, Chief Client Office at CloudWave has experience as both a client and supplier of healthcare IT services. As a former CIO, Tim provides unique insight into the challenges faced by hospitals today and is dedicated to delivering superior, personalized service to our customers.

Eric Gasser is the Vice President and CIO of Information Systems at Wooster Community Hospital Health System. He has 18 years of experience in information systems and clinical informatics with 16 years of MEDITECH experience and currently serves on the MUSE Board of Directors.

John Gomez, Chief Security and Engineering Officer, is an internationally known healthcare technology and cybersecurity leader, author, and speaker providing cybersecurity expertise and guidance to healthcare organizations for more than 30 years.

Matt Donahue serves as CTO at CloudWave. Matt is working to innovate and redefine traditional health IT to allow true adoption of cloud services by hospitals to achieve an “always available from anywhere” architecture.

1041 - Take Advantage of Emerging Cybersecurity Trends in Healthcare to Advance Your Security Strategy

Track: Support & Technology

Presenter: John Gomez

Organization: CloudWave

Scheduled: Saturday June 10 at 8:30 am



While healthcare has made advancements in the last couple years to ramp up cybersecurity measures, as an industry, we are still way behind in the implementation and execution of safeguards against today's modern attackers. Yet, healthcare is a top target for cyber attackers.

After extensive cybersecurity work with healthcare organizations, evaluating key learning from the past couple years, and evaluating cybersecurity technology for healthcare, there are key areas where the healthcare industry is falling short and can act to significantly advance healthcare cybersecurity. We will cover these areas in this session.

In addition, we will share key learnings from the energy sector which is an industry that is at the forefront of cybersecurity. We'll share techniques, tactics, and practices to address similar challenges that healthcare faces.

Learning objectives:

- Learn key areas where you can focus cybersecurity efforts to significantly advance your posture as well as emerging trends in healthcare cybersecurity and how they will impact your organization.
- Learn key tactics for protecting your patients from a cyberattack and how this differs from your IT team's strategies.
- Learn how other critical infrastructure industries have implemented strategies to overcome similar cybersecurity challenges and how they can be applied to healthcare.

John Gomez is the Chief Security and Engineering Officer at CloudWave and oversees the Sensato Cybersecurity portfolio. John has a strong background in developing solutions to comply with NIST requirements for critical infrastructure and has been involved in cybersecurity and high technology for more than three decades. John has lectured and trained on cybersecurity and advanced technology topics worldwide. Before founding Sensato, John held executive roles at Allscripts, WebMD, and Microsoft.

1042 - More on Time Payments, Less Credit Holds, and Angry Vendors: Managing the MEDITECH MMAP Interface

Track: Expanse

Presenter: Alan Elefson

Organization: Huron Consulting Group

Scheduled: Friday June 9 at 2:10 pm

Poor management of the MMAP interface leads to major financial problems like accruals (un-invoiced receipts), late payments, and overpayments. This session will show you how to use the MMAP Interface (no additional expense) to better manage and track exceptions from AP, MM, and management perspectives.

Learning objectives:

- Be able to identify difference between AP, MM, and AP/MM exceptions that can cause late payments and ultimately credit holds.
- Be able to understand how to set the system to review exceptions from an AP and an MM perspective.
- Understand accruals and how they are reportable before month end.

Alan Elefson, Senior Consultant at Huron Consulting Group, has worked with over 100 MEDITECH hospitals over a nearly 20-year career focusing on the Materials Management and Accounts Payable modules. He has worked extensively with MAGIC, CS (especially 5.67), 6.0, and Expanse systems.

1043 - Cleaning the Item Master: Most Efficient Methods for Maintaining One of the Largest MEDITECH Dictionaries

Track: Expanse

Presenter: Alan Elefson

Organization: Huron Consulting Group

Scheduled: Thursday June 8 at 1:30 pm

The item master is one of the largest dictionaries in MEDITECH. It drives purchasing, receiving, inventory, and PO invoice matching, as well as patient charging and other functions. Many vendors and GPOs want the data in the item dictionary to help the hospital load more accurate pricing and for contract analysis. There are multiple ways to maintain the item dictionary that will be reviewed in this session.

Learning objectives:

- Understand the best methods of editing items and when to use them.
- Understand how to best edit packaging strings.
- Understand how to share the item master with vendors and internally.

Alan Elefson, Senior Consultant at Huron Consulting Group, has worked with over 100 MEDITECH hospitals over a nearly 20-year career focusing on the Materials Management and Accounts Payable modules. He has worked extensively with MAGIC, CS (especially 5.67), 6.0, and Expanse systems.

1044 - Migrating Reports to Expanse: Can We Talk?

Track: Business Intelligence, Quality Management and Reporting

Presenter: Jamie Gerardo

Organization: Acmeaware, Inc.

Scheduled: Thursday June 8 at 3:10 pm

Implementing a new EHR is a big job that every hospital undertakes at some point. If you're on MEDITECH MAGIC, C/S, or 6.0x and considering an upgrade to Expanse, a frequently overlooked area is planning for migration of your existing (and likely very sizable) library of custom reports to work with your new system. You may have hundreds of NPR or Data Repository-based reports, all of which will need to be re-written for Expanse. Custom NPRs will have to be replaced entirely with either Data Repository or Report Designer reports. Existing Data Repository reports will need updating too - with so many reports to evaluate and replace you'll need a plan.

In this education session, we'll discuss the report migration considerations you need to know during the planning stages before your move to Expanse. This will include how to efficiently build a catalog of your existing reports, and how to prioritize and refine the list for those that will need to be converted. We'll also talk about other considerations related to reporting you may not have considered, including data extracts, planning for regulatory quality program reporting in Expanse, and the challenges for those hospitals considering the MaaS platform. We'll also talk about issues and considerations during the migration to Expanse, and finally things to attend to after your go-live that will affect your ongoing report conversions, potentially for months after your initial live date.

If your hospital is considering the move to Expanse, and has a deep library of existing custom reports, don't miss this session!

Learning objectives:

- What to consider during the planning stages of an upgrade to MEDITECH Expanse for converting your existing custom report library.
- How to define a new reporting strategy and decision-making methodology during the migration to Expanse.
- How to best handle ongoing custom report requests after your Expanse go-live, including which informatics tools are available for new development.

Jamie Gerardo joined AcmeWare in 2008 and is Vice President of our Professional Services group. Jamie has been an integral part of AcmeWare's growth, including our custom reporting services and quality reporting implementation and project management. Jamie has a passion for databases and enjoys sharing information and teaching others. She has been involved with MEDITECH healthcare for the past 15 years, with a concentration on the Data Repository environment since 2005. She studied Business Administration in Management at Texas State University.

1045 - Streamlining and Integrating Patient Visit(s) Authorization

Track: Revenue Cycle and Patient Access

Presenters: Robin Adams, Kimberly Burt, and Michelle Culbertson

Organization: Huron Consulting Group

Scheduled: Friday June 9 at 1:20 pm

Denials are a hardship and a challenge for every healthcare system. How often have you attended meetings to discuss the details of your facility's monthly denials? How many of those denials are due to the lack of or expired authorizations? Have you collectively discussed how your facility could better manage authorizations proactively to avoid these denials in the first place? MEDITECH's Authorization and Referral Management (ARM) application, can help!

MEDITECH's integration of ARM application, in the Web and Desktop platforms, can help you manage your authorizations and reduce your denials in both the Acute and Ambulatory settings. We will discuss how and why this integration is necessary for revenue departments of any healthcare system. We will show the updated Expanse capabilities of the system and identify process opportunities to set up, track and monitor authorizations from the front-end, clinical, and back-end perspectives.

Join us to learn how to mitigate the challenges of authorization denials through the integration of the MEDITECH's ARM application with Case Management, Revenue Cycle, Patient Access, and Health Information Management.

Learning objectives:

- Define Authorization processes from Ambulatory and Acute.
- Identify opportunities for proactive authorization tracking and management.
- Measure and analyze denials caused by prior authorization issues.

Robin Adams, Healthcare Tech Manager at Huron Consulting Group, has 27 years of experience in Health Information Management, with 24 years of MEDITECH support, educational development, and implementation; and 24 years of Revenue Cycle, Patient Access, and Health Information Management experience.

Kimberly Burt, Healthcare Consultant at Huron Consulting Group, has 21 years of experience in Health Information Management and Compliance Leadership experience, with 17 years of operating and managing projects within the MEDITECH space; and 11 years Healthcare Information Technology consulting.

Michelle Culbertson, RN, MSN in Nursing Informatics, Lead Analyst Consultant at Huron Consulting Group, has 21 years of nursing experience and 14 years of IT experience.

1046 - OR Utilization Analysis – Optimizing Scheduling and Utilization Through Analytics

Track: Business Intelligence, Quality Management and Reporting

Presenters: Glen D'Abate and Miranda Collier Amend

Organization: Acmeware, Inc.; Milford Regional Medical Center, Milford, Massachusetts

Scheduled: Saturday June 10 at 8:30 am

In this educational session, we will explore how disparate data available in your MEDITECH EHR can be brought together and analyzed to provide insight into the scheduling and utilization efficiency of operating room resources. Your EHR collects hundreds of data points associated with scheduling, timing, activity, and outcomes of processes and procedures related to OR utilization. The challenge with deriving actionable information from this data is presenting and visualizing it in a manner that can quickly and easily identify what is working as anticipated, and what processes are less optimal or not working as intended.

We'll demonstrate how to identify where this data can be derived from your EHR and Data Repository and brought together into datasets that allow for detailed analysis. We will review strategies for presenting this data and demonstrate the use of Microsoft's Power BI platform to build interactive data visualizations that present thought-provoking OR metrics. Metrics reviewed will include surgeon and provider utilization, block utilization, identifying culprits and causes of late starts and other OR inefficiencies, and much more. If your goal is to learn how to optimize your OR resources, you don't want to miss this session!

Learning objectives:

- Learn why OR scheduling optimization and metrics are vital to a hospital.
- Learn how Microsoft Power BI enables interactive and dynamic data analytics with OR and surgery information.
- See real-world examples for OR block and utilization reports developed in collaboration with Milford Regional Medical Center.

Glen D'Abate has nearly 40 years' experience working in the healthcare IT field including 13 years at MEDITECH where he led development of the Data Repository, and over 24 years as president and CEO of Acmeware. Under Glen's guidance, Acmeware has become the preeminent leader in providing custom

report solutions in the MEDITECH EHR space and he is recognized as an innovative leader in report design and development, custom applications, and data interfacing solutions. Glen has an undergraduate degree in Engineering and Economics from Trinity College and graduate degrees in Biomedical Engineering and in Finance from Rensselaer Polytechnic Institute and Boston College, respectively.

Miranda Collier Amend is a Business Intelligence Analyst at Milford Regional Medical Center in Massachusetts. She began her nearly 20-year career at MEDITECH before moving to New England Baptist Hospital and receiving her M.S. in Health Informatics from Northeastern University. She has been at Milford since 2014 supporting a variety of applications and implementations, including the perioperative area in Magic. Currently she works with Expanse to put healthcare data in the hands of decision makers to drive patient care and business operations.

1047 - Ignorance Isn't Bliss: Uncovering and Resolving Patient Privacy Issues

Track: Other

Presenters: Mary Everett and Monica Williams

Organization: iatricSystems

Scheduled: Friday June 9 at 1:20 pm

What patient privacy issues are your hospital facing today? The problem is, with the increased complexity of healthcare IT, it's difficult for patient privacy teams today to know exactly where their issues are. Is it the availability of protected health information via patient portals, the difficulty of pulling in multiple systems, or maybe something you have yet to uncover?

In this educational session, we'll cover some of the most common issues facing patient privacy teams today, ways to uncover potential gaps in your organization, and provide insight on how AI and automation can be used to help overcome these challenges.

Learning objectives:

- Identify potential gaps in patient privacy programs.
- Learn the role of A.I. and automation in patient privacy today.
- Learn best practices to limit the possibility of a potential breach.

Mary Everett, Vice President, Sales, and Marketing at iatricSystems, has over 30 years' experience as an accomplished healthcare IT consultant, working on multiple EHRs including MEDITECH, Cerner and Epic. Mary's deep understanding of the challenges facing hospitals and staff allows her to identify both practical and actionable solutions. As an expert in both Meaningful Use and JCAHO requirements, and as an owner of her own IT consulting company, Mary brings this unique perspective to help elevate patient privacy practices.

Monica Williams is the customer success specialist for patient privacy at iatricSystems. Monica helps healthcare organizations succeed by her commitment to educating internal teams on best practices, acting on feedback to make quality enhancements, and ensuring each team member's voice is heard.

1048 - From Jurassic to Fantastic: An Introduction to Patient Acquisition & Healthcare Marketing in 2023

Track: Patient Engagement

Presenter: Hugh McClearn

Organization: rater8

Scheduled: Friday June 9 at 1:20 pm

With today's rapid shift in the patient pathway to obtaining healthcare, it feels like eons since people went to their primary care physicians for referral to a specialist. The reality is that online resources are swiftly impacting the way patients seek out and select providers. With the internet prompting a rapid evolution in patient acquisition from word of mouth to the digital scene, the search for providers has become reminiscent of online shopping.

During this session, we'll cover where practices tend to fall short as patient expectations shift, and the digital patient acquisition strategies available to address these shortcomings. With a winning marketing strategy, practices can adapt to healthcare's changing digital landscape and evolve alongside healthcare consumerism to drive patient acquisition going forward.

Learning objectives:

- Recognize where your practice could improve its digital presence as patient preferences shift to align with what they've come to expect to see online.
- Assess which digital patient acquisition strategies will most successfully address any shortcomings, and integrate them with your practice's marketing plan.
- Use analytics tools to measure and evaluate the effectiveness of your digital marketing strategy over time.

Hugh McClearn is currently a Senior Solutions Consultant for rater8 where he assists hospitals, healthcare systems, and private practices achieve their goals of standing out amongst their competition when patients are searching online. Additionally, with the help of the rater8 platform he offers tools and analytics to help these groups understand and improve their patient experience. Prior to rater8, Hugh has been in various roles selling EHR software to enterprise groups in various medical specialties for over 10 years. Hugh has the ability to effectively communicate advanced medical and technical processes amongst diverse groups of healthcare professionals, all while maintaining focus on the integrity of the product and relationship. Hugh's personal mission is to exceed customer expectations by developing long-term relationships based on honesty, integrity, and trust.

1049 - Moving From a Disparate Ambulatory System to ONE EHR

Track: Expanse

Presenter: Kelly Ziner

Organization: Healthcare Triangle

Scheduled: Friday June 9 at 10:10 am

This presentation will provide organization's whose medical practices/clinics are on their own EHR and are looking to move to MEDITECH Expanse a global view of benefits and challenges of this large undertaking. There are clear advantages to moving to one EHR including shared clinical data such as the patient's problem and history list, medication and allergy list, and immunization record. There are also

advantageous revenue cycle integration features including scheduling, billing, and medical records. However, with these integration points comes the challenge of moving a governance structure that was once siloed to a collaborative decision-making body. We will share some of the strategies for a successful integration of two systems.

Learning objectives:

- Data integration benefits and challenges.
- Governance and standardization approaches.
- Breaking organizational resources silos and collaboration methods.

Kelly Ziner has over 13 years of MEDITECH experience. She is currently a principal consultant at Healthcare Triangle specializing in web ambulatory and is dedicated to increasing provider and end user satisfaction by providing expert level knowledge in all areas of web ambulatory as well as acute integration and quality.

1050 - How to Fully Image-Enable Your MEDITECH EHR

Track: Interoperability/Integration

Presenter: Tim Kaschinske

Organization: BridgeHead Software Inc.

Scheduled: Friday June 9 at 10:10 am

In this presentation, we will discuss the challenges MEDITECH hospitals face in managing and sharing medical images across and beyond their organizations. The exponential growth of image volumes and fidelity, combined with the federal push for data sharing and the mandate to eliminate information blocking, has made it challenging for MEDITECH hospitals to store, protect, and provide access to all of the medical images across their organizations. This poses a problem for clinicians who require access to imaging data across the enterprise safely and efficiently – particularly for tumor boards, multi-disciplinary teams (MDTs), or when engaging with third-parties' services providers (such as teleradiology).

The presentation will explore how to fully image-enable your MEDITECH environment so that your hospital can overcome these challenges whilst laying a foundation for underpinning your Enterprise Imaging or wider healthcare data management strategy.

Learning objectives:

- Understand the current challenges MEDITECH hospitals face when it comes to storing, protecting, and providing clinicians with easy access to ALL of their medical images (not just radiology).
- Learn the importance of an Enterprise Imaging strategy, especially as more clinical departments (such as cardiology, pathology, dermatology, ophthalmology) become more digitally mature.
- Explore how hospitals can underpin their Enterprise Imaging strategy by fully image-enabling their MEDITECH environment across their organization and beyond.

Tim Kaschinske, Senior Product Manager, has been with BridgeHead Software for over 10 years but has over 23 years' experience in healthcare and data management. His responsibilities include listening to

and understanding the challenges of hospitals, finding innovative ways to help solve their complex data management problems, all in a bid to support better healthcare delivery and make a positive impact in people's lives. Tim has had senior roles in technology and development in organizations such as: Symantec, Agfa, and Mitra Corporation prior to BridgeHead Software.

1051 - Harnessing the Power of Business Intelligence to Increase Patient Supply Revenue and Data Accuracy

Track: Business Intelligence, Quality Management and Reporting

Presenters: Tony Jerald and Glen D'Abate

Organization: Experis Health; Acmeaware

Scheduled: Thursday June 8 at 3:10 pm

This session will provide insights on the value of assessing an organization's supply chain workflow processes as well as the integrity of the data within the dictionaries such as charge master, vendor, and item master using a Business Intelligence (BI) Dashboard. We will present jointly with a customer who has recently completed an assessment process and share tangible findings and remediation initiatives that are underway with the sizable projected short- and long-term benefits both to operational overhead and positive bottom-line revenue.

Learning objectives:

- Insight into the importance and value of completing a supply chain assessment.
- Understand how outcomes of an assessment can transform into an executable road map with tangible outcomes to reduce operational expenses and increase revenue.
- Gain Knowledge how BI information can sustain a supply chain best practice environment.

Tony Jerald, Director, Financial Applications, Experis Health has been an innovative materials manager, project manager, and health IT professional with more than 25 years of experience. Tony has more than 10 years of experience working directly for hospitals in various roles, including Director of Materials Management. Driven to continually improve, he is a certified Project Management Professional (PMP), Certified Information Systems Risk and Compliance Professional (CISRCP), as well as a certified consultant for MEDITECH's Expanse EHR platform. He has helped improve organizations with his materials management, implementation, compliance, project management, and financial expertise. This diverse experience has helped shape a well-rounded approach to today's complex issues facing healthcare materials management and IT.

Now, Tony is on a mission to spread the message of how important healthcare financial applications are to a hospital's bottom line. Throughout his career, he has seen the good, bad, and ugly of hospitals across the country. From his perspective, the days of only talking about GPOs, supplies contracting, and JIT inventories are long gone, and it's time to take a new approach. As Director of Financial Applications, he is passionate about and privileged to help clients streamline their ERP systems while boosting their revenue stream.

Glen D'Abate has nearly 40 years' experience working in the healthcare IT field including 13 years at MEDITECH where he led development of the Data Repository, and over 24 years as president and CEO of Acmeaware. Under Glen's guidance, Acmeaware has become the preeminent leader in providing custom report solutions in the MEDITECH EHR space and he is recognized as an innovative leader in report design

and development, custom applications, and data interfacing solutions. Glen has an undergraduate degree in Engineering and Economics from Trinity College and graduate degrees in Biomedical Engineering and in Finance from Rensselaer Polytechnic Institute and Boston College, respectively.

1052 - A Digital Front Door Isn't One Size Fits All – You Can Build a Strategy That's Right for Your Organization

Track: Patient Engagement

Presenter: Audrey Brislin

Organization: Forward Advantage

Scheduled: Friday June 9 at 9:20 am

Patient expectations for consumer-focused experiences have been driving hospitals and healthcare organizations to do more to meet the demands. Patient engagement and experience are on the top of minds for healthcare leadership, but it can be hard to navigate a strategy that fits the needs of the organization, the patients, the technology, and the budget. A Digital Front Door is a broad solution that can mean different things to different organizations, but most importantly it needs to leverage your MEDITECH portal and keep your patients at the center. Where do you start, how do you prioritize and how do you build a door that's the right size for your specific needs? In this session, we will help you break down the elements of a digital front door strategy including integrating your website, patient portal, mobile app, and patient engagement solutions. You'll learn practical tips to create a plan that meets your leaderships goals, maximizes your investment in your MEDITECH EHR, and delivers the experience your consumer-focused patients expect.

Learning objectives:

- Understand the elements that build a digital front door strategy, and why it doesn't have to be a one size fits all approach.
- Get practical tips to evaluate your existing technology and steps to take towards a more seamless approach and consistent patient experience that leverages your MEDITECH EHR and how to engage providers & leadership from the beginning to create a cohesive strategy that will lead to better adoption in the long run.
- Learn deployment pitfalls to avoid and best practices for a successful rollout as well as how to justify ROI & prioritize based on your organization's specific needs.

Audrey Brislin is Vice President of Marketing & Product at Forward Advantage and has worked in software & technology for most of her career, spending the past 10+ years in healthcare marketing. Audrey is working alongside Forward Advantage development teams and customers to bring a solution to market that integrates a health system's patient engagement initiatives with the EHR to provide a consistent experience for patients in their health journeys.

1053 - Align Collection Streams and Collection Related Dictionaries

Track: Revenue Cycle and Patient Access

Presenter: Sheryl Easter

Organization: Nordic Consulting/Healthtech

Scheduled: Saturday June 10 at 10:10 am

Is your Patient Financial Services Team confronted with challenges related to timely account management and overwhelmed with the volumes of follow up required? Are you faced with higher volumes of avoidable write-off or staffing constraints? As a standard, not only are healthcare leaders faced with increasing pressures related to stringent regulations, reduced labor force, rising costs, and reduced reimbursement rates; they are also internally challenged with revenue integrity concerns to maximize reimbursement, prevent revenue leakage, reduce avoidable write-offs, and improve clean claims rates. The great news is that MEDITECH Expanse provides the foundation and tools necessary for account management.

The objective of this presentation is to share details and insights related to the Collection Streams and Collection Related Dictionaries that will help to improve and streamline Account Management. Examples and workflow designs will be presented.

Learning objectives

- Enhancing Collection Stream Builds: Oversight & Escalation; Filing Limits; Adding Events and Tasks.
- Coordinating Denials with the Collecting Stream Tasks and prevent duplicate work efforts.
- Enhancing Collections Stream by adding MIS Rules.

Sheryl Easter is a Principal Consultant with Nordic Consulting/Healthtech. She has over 35 years' experience working closely with healthcare organizations to help improve their Revenue Cycle and Financial Processes; resulting in increased revenue and decreased avoidable write-offs for the facilities. Sheryl has functioned in various roles including Managing Director-Revenue Cycle & Finance, Project Manager, Senior Management Consultant, and Senior Financial Analyst working in the areas of Patient Financial Services, Patient Access, Scheduling, Materials Management, Authorization/Referral Management, Health Information Management, Abstracting, Payroll, and General Financials. Education has been a key motivator, and after achieving a master's degree (MBA/HCM) with a large focus on healthcare; became and educator focusing on healthcare regulations, optimizations, changes, and revenue cycle.

1054 - Unlocking the Research Value of Clinical Data in Your MEDITECH EMR

Track: Other

Presenter: Tim Kaschinske

Organization: BridgeHead Software

Scheduled: Thursday June 8 at 1:30 pm

The healthcare industry is constantly changing, and with it comes the challenge of accessing and sharing valuable data that is stored in non-standard formats. With an active clinical data repository, you can transform this data into a powerful asset that can help you realize incremental value from your

healthcare resources. By make your clinical data “liquid”, you can access and share it across all medical record systems and approved third party applications, dedicated to clinical research.

Hospitals are often constrained by technology, fiscal, and human resource constraints. That is where technology can now help. This talk will help you understand how to get the most out of your current resources, enabling you to maximize your return on investment.

Learning objectives:

- To uncover valuable data from disparate enterprise applications.
- To aggregate valuable data easily with an active clinical repository.
- To unlock clinical research revenues for your MEDITECH hospital.

Tim Kaschinske, Senior Product Manager, has been with BridgeHead Software for over 10 years but has over 23 years’ experience in healthcare and data management. His responsibilities include listening to and understanding the challenges of hospitals, finding innovative ways to help solve their complex data management problems, all in a bid to support better healthcare delivery and make a positive impact in people’s lives. Tim has had senior roles in technology and development in organizations such as: Symantec, Agfa, and Mitra Corporation prior to BridgeHead Software.

1055 - Not Getting the Most from Your Implementation Investment is Like Kissing Frogs!

Track: Support & Technology

Presenter: Linda Hainlen

Organization: medSR

Scheduled: Saturday June 10 at 10:10 am

Many organizations fall short of getting the most from their MEDITECH project investment because their learning participants do not adequately utilize new features. In this fun interactive session utilizing Disney’s “Princess and the Frog”, we will share how she used training evaluation to drive true learning outcomes for an EHR implementation project. We will share the pitfalls to avoid as well as tips for overall success. Don’t be left kissing frogs – attend this lively and entertaining session to make the most of your entire investment!

Learning objectives:

- The participant will recognize from presented research where training breaks down and will understand how to apply that information to create programs that obtain better outcomes.
- The participant will be able to approach curriculum and learning interventions in a collaborative and results oriented manner using evaluation models to drive learning outcomes instead of leaving them to chance.
- The participant will come away with tools for reporting project status and outcomes.

Linda Hainlen is the Director of Business Development at medSR, a Kirkpatrick Certified Facilitator, and an international author. She served as Director of Learning Solutions for IU Health in Indianapolis, IN for 18 years. Linda has over 25 years of proven experience as a training manager – including real world experience applying the Kirkpatrick principles. Utilizing the Kirkpatrick Business Partnership Model truly

transformed her results and elevated her division at IU Health to a strategic business partner in the organization. She is passionate about working with other healthcare organizations to help them elevate their results through partnering and obtaining sustainable outcomes. Linda is an engaging facilitator and presenter, who authentically and successfully connects with audiences by bringing concepts to life through sharing her own experiences from working in the healthcare industry. Her practical and genuine approach inspires participants not only in thinking but in applying their newfound knowledge and skills.

1056 - How To Keep the MAGIC Alive!

Track: Interoperability/Integration

Presenter: Jamie Clifton

Organization: BridgeHead Software

Scheduled: Friday June 9 at 9:20 am

As MEDITECH continues to focus on its vision for Expanse, hospitals using MAGIC will ultimately need to transition to a new EHR. However, a new EHR will only allow limited migration of clinical and operational data, which means hospitals will need to develop strategies to keep their MAGIC data alive. One use case is that healthcare organizations are required to comply with the ONC's Information Blocking rule by providing a patient's Designated Record Set (DRS), which includes data held within MAGIC, to patients, authorized third parties, and payers in an electronic format or be subject to penalties. And there are others. 'Doing nothing' is not an option as it can expose organizations to potential operational, legal, and financial risks.

To address these challenges, hospitals can implement a 'liquid' clinical data repository to store and manage their MEDITECH MAGIC data for the long-term. This will enable seamless access and interoperability to their MAGIC data, fulfil regulatory and compliance obligations, and allow for secondary use for analytics, AI, clinical research, and other purposes that drive value and impact ROI.

Learning objectives:

- Understand the challenges of keeping your MEDITECH MAGIC data alive in a rapidly changing healthcare technology landscape.
- Three strategic considerations for your MEDITECH MAGIC data.
- How to achieve 'data liquidity' and provide seamless access and interoperability for your MAGIC data and beyond.

1057 - Report Designer – Tips, Tricks, and Gotchas

Track: Other

Presenter: Stacey Collins

Organization: The HCISolution

Scheduled: Thursday June 8 at 1:30 pm

Learn from our experience as we discuss some of the Report Designing "gotcha's" and tips and tricks.

Topics:

- Working with draft versions of reports

- Basic vs. Advanced
- Field Lookups
- Proper index selection
- Do loops within Do loops
- Extraction report records
- Deleting blank lines
- Aligning fields and graphics
- Rules with incorrect record selection
- Watch out for unexpected nil value variables
- MEDITECH expression logic (left-hand-side of expression is always returned for expressions that evaluate to true)

Learning objectives:

- Define versioning and how it can be useful to the report writing workflow. Understanding versioning allows the learner to efficiently test changes and revert to historical versions, as needed.
- Describe several useful Report Designer tips that will help with your report writing workflow. The learner will develop a more dynamic strategy for solving Report Designer challenges.
- Describe some common Report Designer issues to watch out for. This topic ensures that the learner knows how to avoid these report writing pitfalls.

Stacey Collins, Director of Data Services at The HCISolution, began her career in healthcare IT in 2001 after graduating with a Bachelor's degree in Computer Science. While at MEDITECH, she worked as a Programmer/Analyst in support and development. In her desire to further improve the customer experience, Stacy worked as a Development Designer providing input toward the development and design of applications. Having fulfilled the software side of healthcare, Stacey's passion for the industry led her to complete a Master's degree in Bioinformatics helping her understand the science behind the medicine. Stacey is customer focused and applies her strong technical skills in a variety of ways to meet the needs of the customer.

1058 - Maximize Revenue, Reimbursements, and Workflow with Cloud Faxing

Track: Revenue Cycle and Patient Access

Presenters: Kevin Frazier and Jeannene Austin

Organization: Forward Advantage

Scheduled: Friday June 9 at 9:20 am

Referrals and insurance reimbursements are critical to the success, stability, and profitability of healthcare organizations. The ability to reliably deliver lab and other test results to referring providers positively impacts patient care and provider satisfaction, thus increasing referral rates. Healthcare organizations still must rely on faxing to achieve this but are often unsatisfied with the reliability of traditional telephony options. In this session we will discuss how cloud faxing can address those challenges and how to identify the best type of faxing for your organization that will in turn increase reliability, referral rates, and cash flow.

Learning objectives:

- Understand the impact of reliability in faxing communications to referrals, reimbursements, and ultimately revenue.
- Ability to identify the key considerations for choosing between virtual telephony, traditional phone lines, and cloud faxing.
- Ability to calculate ROI of moving to cloud faxing and whether or not it makes sense for your organization.

Kevin Frazier is the Manager of Client Services and has been with Forward Advantage for over 20 years. He is focused on ensuring that customers receive the highest level of service and support in the healthcare industry. He also excels at finding creative solutions to customer challenges.

Jeannene Austin is a Senior Product Manager at Forward Advantage, Inc. with over 25 years of experience in both healthcare information technology and enterprise storage software. Jeannene has spent the past 11+ years at Forward Advantage driving new and existing product strategies and development with a focus on customer engagement to deliver reliable and scalable products that address customer use cases, workflow, and usability concerns.

1059 - MaaS Expanse Implementation: Planning is the Key to Success

Track: Expanse

Presenters: Lisa Steen and Naomi Smith

Organization: HealthNET Systems Consulting, Inc.

Scheduled: Friday June 9 at 9:20 am

If your hospital currently operates MAGIC or C/S, or even if MEDITECH as a Service (MaaS) is your first MEDITECH system, you'll want to be sure you understand the significant upfront planning necessary for end-users to love their new EHR once it's installed. During this presentation, we will share MaaS experiences, identify specific steps you should take to prepare for a successful MaaS implementation, and provide numerous recommendations for how clinical and financial areas can succeed. Anyone at an organization moving (or thinking about moving) to MaaS will find this session beneficial, including IT, clinical staff, and financial staff.

Learning objectives:

- Attendees will be able to identify specific steps to take to prepare for a successful MaaS implementation.
- Attendees will be able to share with colleagues at their organization several recommendations to help clinical areas succeed.
- Attendees will be able to share with colleagues at their organization several recommendations to help financial areas succeed.

Lisa Steen has implemented every MEDITECH version – MaaS, Expanse, C/S, and MAGIC, and she is currently engaged in a MaaS implementation. She is a Director at HealthNET Consulting and has more than 25 years of healthcare experience. She has worked in a variety of settings – from critical access hospitals to multi-facility health systems, and has held CIO, Revenue Cycle Director, Privacy Officer, HIM Director, and numerous other roles. In addition to her MEDITECH expertise, Lisa is also skilled in

athenaHealth, MS SQL, Oracle, SAS, 3M Encoder, HL7 & FHIR file transfer, and various other systems. She brings an extensive knowledge of clinical and financial workflow processes to all of her engagements.

Naomi Smith is a Clinical Consultant with HealthNET Consulting. She has 30+ years of MEDITECH experience (MAGIC, C/S, and Expanse – including MaaS). She is currently engaged in a MaaS implementation, and is well-versed in the design, technical configuration, application build, and training of all clinical, administrative, and patient portal modules. She is exceptional in providing one-on-one physician training. In addition to her MEDITECH expertise, Naomi is also skilled in NextGen, Dragon, DrFirst/RCopia, Imprivata, MS SharePoint, Laboratory Instrument Interfaces, and various other systems.

1060 - Fight Off the Painful and Expensive Effects of Cybercrime with a Comprehensive Digital Identity Strategy

Track: Support & Technology

Presenter: Lee Howard

Organization: Forward Advantage

Scheduled: Thursday June 8 at 1:30 pm



How is your organization handling the complexities of securing your digital identities and digital access to your systems? Identifying a current maturity level can help organizations assess gaps and prioritize the next steps to achieve a unified and comprehensive digital identity program.

An organization without a digital identity strategy is likely relying on ad hoc, manual, and siloed solutions for controlling and managing digital identities – and will likely be exposed to more security risks as a result. As the organization implements specific tools and processes to optimize identity management, they'll be better suited to manage their security posture. Achieving a comprehensive and mature strategy is every organization's goal, but how do you get there? Most, if not all organizations have a varied mix of solutions and processes based on program budgets, priorities, and resources. Based on research and proven success, standard milestones such as moving past tactical, discrete projects to a program of continued alignment and transformation are critical to keeping your organization secure and assuring your ability to adjust to future needs.

Learning objectives:

- Learn how to enhance care delivery and accelerate productivity with quick and secure access to technology solutions.
- Understand best practices for managing the ongoing process of enabling, controlling, and monitoring digital identities.
- Learn strategies to mitigate poor user adoption, risky user behavior (passwords on sticky notes, unlocked workstations, admin access for non-admin users, etc.), and unsecure third-party/vendor access, as well as get tips for achieving the optimal balance of user access, cybersecurity, and compliance.

Lee Howard is Vice President of Client Services for Forward Advantage and has over 20 years of experience in healthcare information technology. Lee oversees the smooth communication between the company and its customers and associates. His teams focus on providing solutions and services for the company's information exchange and faxing solutions, as well as identity and access management solutions.

1061 - Measuring IT Efficiency with Objective Analytic Data

Track: Support & Technology

Presenter: Carl Smith

Organization: King's Daughters Medical Center,
Brookhaven, Mississippi

Scheduled: Friday June 9 at 2:10 pm



The use of data analytics in hospitals has become a crucial part of how we make decisions, provide performance improvement, capture patient/employee engagement and satisfaction, and improve healthcare throughout our facilities. There are many tools and surveys that have become commonly useful for gathering this data including HIMSS Stages, Chime Most Wired, HCAHPS, Best Places to Work, and others. However, there are very few formal solutions that actually capture IT satisfaction within organizations in order to provide better service and proper staffing. In this session, we will discuss objective ways to measure efficiency and client satisfaction in the IT environment.

Learning objectives:

- Develop best practices for IT support.
- Leverage staffing.
- Develop procedures for performance improvement in IT.

Carl Smith is the CIO of King's Daughters Medical Center in Brookhaven, MS. He has worked at KDMC for 29 years. His areas of responsibilities are EHR, networking, telecom, privacy, security, and overall IT policy for the organization.

1062 - Expanse Pharmacy: Common Implementation Pitfalls and Optimization Roadblocks to Avoid

Track: Expanse

Presenter: Amanda Lane

Organization: CereCore

Scheduled: Saturday June 10 at 9:20 am



- Looking through the lens of the pharmacy department, what are the biggest gotchas you need to consider when migrating to MEDITECH Expanse?
- How can you keep the momentum going to optimize PHA in a way that encourages adoption with your clinicians?
- Is it time to reconsider MM.PHA?
- If the MM.PHA product hasn't been on your radar, what are the compelling reasons why you should consider implementing it?

Learn how your healthcare organization can stay on track and get the most out of pharmacy.

Learning objectives:

- Discuss the benefits of PHA and basic features of MEDITECH's MM.PHA product.
- Identify some of the common pitfalls for pharmacy departments during an Expanse implementation.

- Understand pharmacy tools available for existing Expanse clients for continued optimization.

Amanda Lane is a senior consultant with over 12 years of healthcare implementation and customer service experience. She began her career with MEDITECH, implementing 6x Pharmacy and working as a licensed Pharmacy Technician for a retail pharmacy. Over the years, Amanda has had the opportunity to lead facility teams in build, workflow resolution, training, and troubleshooting of the MEDITECH PHA, MM.PHA, and ERX applications.

She has extensive experience working with and building the medication portions of EBOS, third-party vendors and products related to pharmacy including FDB/AlertSpace, DrFirst/Surescripts, Zynx/Authorspace, Pyxis, Omnicell, Cardinal, and Forward Advantage. Amanda has worked closely with a number of facilities utilizing 340B, as well as MMPHA for their inventory tracking tool. Her expertise in MEDITECH remains in PHA, MM.PHA, and eRx, though that knowledge branches firmly into OM, PCS, SUR, and ONC due to the wide use and integration of medications within the clinical applications of an EHR.

1063 - Hypoglycemic Events: Managing and Measuring the New eCQM in Expanse

Track: Expanse

Presenter: Kelly Del Gaudio

Organization: CereCore

Scheduled: Friday June 9 at 2:10 pm

HH-01 (Hospital Harm: Severe Hypoglycemia) is a new quality measure introduced by CMS for 2024 reporting. It is aimed at tracking hospital care of inpatients experiencing a hypoglycemic event. Hypoglycemic events in the hospital are among the most common adverse drug events. The rate of hypoglycemic events is considered an indicator of the quality of care provided by a hospital, mainly because severe hypoglycemic events are avoidable by careful use of antihyperglycemic medication. The rate of these events has shown to vary from hospital to hospital which indicates an opportunity for improvement and the adoption of a best practice protocol.

During this presentation we will walk you through a carefully designed best practice for MEDITECH Expanse aimed at reducing the rate of hypoglycemic events in the inpatient setting. We will equip you with everything you need to address this measure at your organization. We will start by demonstrating the workflow design while discussing best practice recommendations from the NLM, the ACP and AHRQ. We will explain MEDITECH's recommendations for data and nomenclature mapping to ensure you meet the measure. Lastly, we will address questions, concerns or discuss alternative workflow options. All attendees will be emailed an implementation guide and associated rules to download.

Learning objectives:

- How to implement a best practice protocol for the management of Hypoglycemia in the acute care setting.
- How to use rules and surveillance boards to identify patients with Iatrogenic Hypoglycemia during their current visit which puts them at high risk for a subsequent episode.
- How to map recorded data within the EHR/EPR to ensure quality reporting is accurate.

Kelly Del Gaudio, Clinical Analyst with CereCore, has been working with MEDITECH products for over 17 years. She has been involved in projects in the US, Canada, Ireland, and the UK. Her primary focus has been advanced clinicals, rule writing, clinical optimization, and clinical documentation improvement. She has helped many hospitals optimize workflow inconsistencies, address bottlenecks, and implement clinical best practices to achieve higher EMRAM Scores, improve MU initiatives and reach higher HIMSS Stages. In 2018 she was a featured guest on the "HIT Like a Girl" podcast which celebrates innovative women in Health Information Technology.

Kelly has also been an active member of the MUSE community. She has presented numerous times at MUSE Inspire and the annual MUN conferences respectively. She has also served on the MUSE Commercial Member Committee (2021-2022).

1064 - The New Rules of Engagement – How Hospitals Can Compete in the Age of Mobile Healthcare

Track: Patient Engagement

Presenter: Cody Strate

Organization: Access

Scheduled: Friday June 9 at 9:20 am



This is not your typical MUSE presentation. Think of it more like a TED Talk on how healthcare has operated for 100+ years, how that established system is being challenged by the convergence of numerous factors, and why emotion, not logic, is a key to hospital success. For more than a century, hospitals have relied on geographic proximity to attract patients. But the rise of mobile healthcare is about to disrupt this long-standing model.

In this presentation, we will explore how hospitals can compete in a mobile-first world by adapting to the changing landscape. We'll begin by examining the historical landscape of hospitals and how it has led to a geocentric approach to patient care. Then, we'll dive into the convergence of trends that is driving the mobile healthcare revolution, including the impact of the pandemic on technology solutions and consumer behavior. From there, we'll discuss the emotional nature of patient decision-making and the need for hospitals to differentiate themselves as high-quality and trustworthy options in a mobile-first world. Specifically, we'll discuss the importance of investing in mobile solutions and convenience for patients, as well as the need for hospitals to win patient trust and loyalty. By understanding the changing healthcare landscape and adapting to the new rules of engagement, hospitals can remain competitive and successful in the years to come.

Learning objectives:

- Understand how the rise of mobile healthcare is disrupting the historical geocentric approach to patient care and how hospitals can adapt to remain competitive.
- Gain insight into the emotional nature of patient decision-making and learn strategies for winning patient trust and loyalty in a mobile-first world.
- Learn how to orient your hospital's thoughts, efforts, and resources towards understanding the changing healthcare landscape and building a comprehensive strategy that differentiates your hospital as a high-quality and trustworthy option in a mobile-first world.
- Gain insight into the importance of investing in mobile solutions, convenience for patients, and effective marketing and sales strategies that resonate with patients.

Cody Strate is an award-winning healthcare technology expert, 3+ year Forbes Communication Council member, and has over two decades of experience working with acute care hospitals across eight countries. He established the Access eForms relationship with MEDITECH, coordinated the MEDITECH as a Service patient eSignature solution, and is currently leading Access's involvement in the Greenfield Alliance.

1065 - MEDITECH 6x to Web Expanse Migration – A Clinical Perspective

Track: Expanse

Presenters: Kay Bain and Jodi Nolden

Organization: Huron Consulting Group; Sauk Prairie Healthcare, Prairie du Sac, Wisconsin

Scheduled: Friday June 9 at 10:10 am

This will be an acute clinical prospective discussion on the expectations of a MEDITECH 6x to Web Expanse migration implementation with lessons learned and key takeaways. Focusing on the actual transition including both nursing and provider to include some ambulatory integration.

Learning objectives:

- Migration experience.
- Lessons learned.
- Key takeaways.

Kay Bain is a seasoned, 19-year healthcare IT professional with extensive experience implementing, managing, and supporting advanced clinical information systems. She is a trained Emergency Department nurse with over 30 years of trauma nursing experience.

Jodi Nolden is a Health Informatics Analyst with Sauk Prairie Healthcare. Jodi has been with SPH for 26 years working with providers and nurses to enhance their workflow using MEDITECH.

1066 - The End of the PHE – What Does it Mean for Me?

Track: Other

Presenter: Doreen DeGroff

Organization: CereCore

Scheduled: Saturday June 10 at 10:10 am

On January 30, the White House announced it would simultaneously end the COVID-19 national emergency and public health emergency (PHE) declarations on May 11. Hospitals and health systems need to prepare for the restoration of waived requirements and other changes in policy and practice. Federal agencies put in place numerous flexibilities, provided support for vaccines and therapeutics, and took significant steps to support healthcare providers who were working to save lives amidst this crisis. After three years of pandemic flexibilities, the return to “normal” will require changes across many parts of hospitals and health systems – and that work should begin now. This presentation will cover items to review and how to “roll back” what was put in place to support the PHE.

Learning objectives:

- What is the current status of items put in place to support the PHE?
- How will these new policies and requirements impact healthcare sites?
- How can you get more information, review status, and determine priority for the work?

Doreen DeGross is a Product Director of MEDITECH consulting services at CereCore. She started in the hospital setting as a patient access director. She has over 35 years of experience focusing on process improvement, revenue cycle management, and regulatory compliance initiatives in all healthcare settings. Doreen also serves on the HIMSS T.I.G.E.R. Team (Technology Informatics Guiding Education Reform) and on the Advisory Panel for the Business Women in Leadership at Florida International University.

1067 - Give Doctors What They Want – Personalized Order Sets

Track: Expanse

Presenter: Nathan Koske

Organization: CereCore

Scheduled: Friday June 9 at 1:20 pm

Save physicians time and win them over by creating standardized order sets that fit their needs. See a demo of how to personalize order sets and successfully create a standardized order set library for your organization. Plus, we will discuss decisions and conversations you should have so that building standardized order sets will go smoothly.

Learning objectives:

- Learn the options available when using the Manage Personal Sets routine.
- Learn how Manage Personal Sets routine can improve order set maintenance processes.
- Learn how to create a standardized order set library while still providing many satisfiers to physician staff.

Nathan Koske is a Manager with CereCore's MEDITECH Professional Services Group. He brings more than 13 years of healthcare IT experience, having managed several successful MEDITECH implementations.

1068 - A Study in Moving to Expanse – Pre, Intra, and Post-LIVE

Track: Expanse

Presenters: Todd Prellberg, Mike Bartman, and Mark Valutkevich

Organization: RML Specialty Hospital, Hinsdale, Illinois; Tegria

Scheduled: Friday June 9 at 1:20 pm

This session aims to provide attendees with a comprehensive understanding of the key principles and best practices involved in successfully implementing MEDITECH Expanse, in a hospital setting. By the end of the session, attendees will be able to apply these principles and practices to their own healthcare organizations, identifying opportunities for improving their current EMR systems or adopting new ones.

The session will begin with an overview of the benefits and challenges of using MEDITECH ExpansE in a hospital setting. Attendees will learn about the ways in which MEDITECH ExpansE can improve patient care, clinical workflows, and data management, as well as the challenges that can arise during the implementation process. They will also learn about the importance of effective planning and project management in successfully implementing MEDITECH ExpansE.

The session will then focus on the specific steps involved in implementing MEDITECH ExpansE. Attendees will learn about the vendor selection process, including how to evaluate different vendors and negotiate contracts. They will also learn about the importance of preparing the infrastructure for the new system, including hardware, software, and network requirements. Finally, attendees will learn about the importance of staff training in ensuring that the new system is used effectively.

Throughout the session, attendees will gain insights into the specific challenges that were encountered during the implementation of MEDITECH ExpansE at the RML Specialty Hospital, and how these challenges were addressed. They will also learn about the impact that the new MEDITECH ExpansE system has had on patient care, clinical workflows, and data management at the hospital.

Finally, attendees will be able to apply the principles and practices learned in this session to their own healthcare organizations. They will be able to identify opportunities for improving their current EMR systems or adopting new ones, and they will be equipped with the knowledge and skills necessary to successfully implement these systems.

Overall, this session is essential for healthcare professionals who are involved in a MEDITECH ExpansE implementation or who are interested in learning more about best practices in this area. Attendees will leave the session with a deep understanding of the key principles and practices involved in implementing MEDITECH ExpansE, and they will be well-prepared to apply these principles and practices to their own healthcare organizations.

Learning objectives:

- Gain insights into how your hospital overcame specific challenges during the implementation process, and how these challenges were addressed.
- Understand the importance of effective planning and project management in the successful implementation of MEDITECH ExpansE.
- Understand the steps involved in implementing MEDITECH ExpansE, including setting an attainable timeline, effective budgeting, solid project oversight, and training plans.

Todd Prellberg, Executive Director / CIO at RML Specialty Hospital has 22 years of healthcare IT experience. He was the Project Manager / Technical Lead for the ExpansE project in August 2022.

Mike Bartman, Director Systems Consultants at Tegria, is an IT professional with decades of leadership experience managing computer systems, information system infrastructures, and software development. His strengths include strategic IT planning, project management, teamwork/building, a proven ability to lead and manage technical staff, excellent technology and problem-solving skills, and the capability of reaching organizational goals by achieving fiscal improvements. Deep experience in gaining consensus and making positive progress in deployment of information technology organization wide.

Mark Valutkevich, Senior Account Executive at Tegria.

1069 - Selecting a "Top Gun" Implementation Partner

Track: Expanse

Presenter: Linda Hainlen

Organization: medSR

Scheduled: Friday June 9 at 2:10 pm

A "Top Gun" implementation requires more than hiring a consulting firm – it takes a partner with experience that is looking out for your best interests. This presentation will be full of practical advice for selecting a partner. And yes, we will have some fun using video clips from "Top Gun: Maverick" to bring home some points. Join us for this vendor-neutral, fun-filled presentation that will help you with your selection process.

Learning objectives:

- Participant will come away with thought provoking criteria for selecting a vendor implementation partner.
- Participant will be presented with three stages of a project to consider when selecting a vendor.
- Participant will come away with "fit expectations" for selecting a vendor including approach, cost effectiveness, and outcomes.

Linda Hainlen is the Director of Business Development at medSR, a Kirkpatrick Certified Facilitator, and an international author. She served as Director of Learning Solutions for IU Health in Indianapolis, IN for 18 years. Linda has over 25 years of proven experience as a training manager – including real world experience applying the Kirkpatrick principles. Utilizing the Kirkpatrick Business Partnership Model truly transformed her results and elevated her division at IU Health to a strategic business partner in the organization. She is passionate about working with other healthcare organizations to help them elevate their results through partnering and obtaining sustainable outcomes. Linda is an engaging facilitator and presenter, who authentically and successfully connects with audiences by bringing concepts to life through sharing her own experiences from working in in the healthcare industry. Her practical and genuine approach inspires participants not only in thinking but in applying their newfound knowledge and skills.

1070 - Web Oncology – A Whole New World with Big Wins for Clinics

Track: Expanse

Presenter: Sarah Smith

Organization: CereCore

Scheduled: Saturday June 10 at 10:10 am

Are you taking advantage of Oncology on the web? Like outpatient clinic practices who utilize Expanse Ambulatory, Oncology offers features that streamline workflows for physicians and nurses. Oncology has integrations throughout several other MEDITECH applications, in addition to an extensive, NCCN-backed, treatment plan library. Attend this session to learn more about the Oncology application and build, plus hear lessons learned from my experiences helping clients plan, build, and implement Web Oncology.

Learning Objectives:

- Learn how acute recurring appointments integrate with oncology and the patient's ambulatory clinic appointments.
- See how oncology treatment plans are built, edited, and maintained.
- Discuss project implementation lessons learned.

Sarah Smith, Sr. Consultant, MEDITECH Professional Services at CereCore, has a clinical background starting out in retail and specialty pharmacies and has been a consultant with CereCore for nearly 13 years. Her MEDITECH application specialties include Oncology, MIS, and Universe (in relation to the Person/User build), CMS/DMD, and Patient Portal. While not proficient, she also has experience in CWS, REG, AMB Front Office and Clinical, PCS, PHA, and LAB thanks to the integrations needed within the oncology installation.

1071 - Are Your Schedulers Working Too Hard?

Track: Revenue Cycle and Patient Access

Presenter: Brenda Cotter

Organization: Ozarks Healthcare, West Plains, Missouri

Scheduled: Thursday June 8 at 3:10 pm

Learn how we are using Community Wide Scheduling in conjunction with Pending Appointments, and Authorization and Referral Management, to reduce denials and streamline centralized scheduling processes.

Learning objectives:

- Using Pending appointments for ITS orders to increase accuracy and improve efficiency for centralized scheduling.
- Creating Waitlist and Worklists in CWS and ARM that complement each other to make it easier for the Auth team and scheduling team to work together.
- Taking advantage of priorities to structure call routines and allows schedulers to focus on what is ready to schedule.

Brenda Cotter has been working in healthcare for over 30 years. Her experience in Billing and Practice Management helped prepare her for her most recent challenge in Healthcare Information Technology. Over the past three years, Brenda has been focused on implementing Expanse and working with the Patient Access team to optimize functionality and workflows to accommodate their needs in the ever-changing world of healthcare.

1072 - User Provisioning – How Hard Can That Be?

Track: Expanse

Presenter: Kim Eldred

Organization: Huron Consulting Group

Scheduled: Saturday June 10 at 10:10 am

User Provisioning is often pushed to the back burner and not given enough attention and focus. This needs to make it to the FRONT. Poor user provisioning can and very well might derail an otherwise successful Go-live. But if it is done well and thoroughly, super user training, end user training, and Go-live will be much more successful and all involved will experience less frustration and anxiety. How to get there in one sentence: Make it a PRIORITY, not an afterthought!

- Start planning as soon as you decide to implement MEDITECH
- Already using MEDITECH and upgrading – that should be easy!
 - What are the differences from current platform as you move to Expanse/Web Expanse
 - Can't I just 'copy' what I already have? Please don't!
 - Role based access: Create a list of your 'roles'; Start a master spreadsheet; Person Profiles; Menus; Application Access; Tips. Tricks and Gotchas – e.g., ED staff and duty roster, quick text access, etc.
- New to MEDITECH – where do I even start?
 - Role-based access (as above)
 - Considerations with a 'fresh' build
- Why is this so hard? Why am I struggling?
 - Layers
 - Where to launch
 - Nobody on the core teams is cooperating!
- Create the template 'user', emulate and TEST, TEST, TEST
- TEST SOME MORE!
- Assign each of your end users one of the role-based templates
- Use the copy from field – it is your best friend!
- Advantages of role-based access
 - Standardizes the build
 - Ease of updating access in the case of transfers from one role to another
 - Ongoing build and creation of users is based on the role employees are hired to fill
 - No more guessing – 'Mary has that job, let's copy Mary', but in the meantime Mary has had three promotions
- Lessons learned
 - Get as much done as possible before Test to Live copy – once Test to Live copy has occurred ALL must be done in TEST AND LIVE target
 - EMULATE, EMULATE, EMULATE
 - Involve core teams for access questions and most importantly for testing
 - Have someone available as training is occurring to fix access on a regular basis

Learning objectives:

- Where to start with User provisioning – a plan for success.
- Tips, tricks and gotchas to watch out for and how to mitigate those situations.
- Lessons learned – let my mistakes help you avoid them!

Kim Eldred, Senior Consultant at Huron Consulting Group, has been in healthcare IT for over 25 years. Initially working in her local hospital, she was involved in the implementations of numerous healthcare systems all leading to the MEDITECH implementation. Fifteen years ago, Ms. Eldred moved over to the consulting arena. Areas of expertise include Clinical Lead, PCS, IDM, PDOC, OM, and MIS-User Provisioning across multiple platforms.

1073 - Be Compliant – How to Prevent Information Blocking

Track: Interoperability/Integration

Presenter: Bobby Edwards

Organization: BridgeHead Software

Scheduled: Friday June 9 at 1:20 pm

The 21st Century Cures Act Final Rule (May 2020), prohibits entities such as HIN/HIE and EHR vendors from engaging in practices that interfere with the access, exchange, or use of electronic health information (EHI). This was augmented with the introduction of the ONC's Information Blocking Rule in October 2022. Failure to comply with this rule can result in ONC civil monetary penalties, fines, and corrective action requirements.

In this presentation, we will discuss the nature of the Information Blocking rule and the associated obligations and penalties for non-compliance. We will explore how MEDITECH hospitals can identify sources of EHI; how they can assess their ability to access, use or exchange information (and the implications of doing so); and look at strategies providers can utilize to mitigate risks and create an interoperable data environment to ensure that patients (as well as nominated providers) can access the information needed to make informed decisions about a patient's health.

Learning objectives:

- Understand the key components of the 21st Century Cures Act Final Rule and the ONC's Information Blocking rule and its implications for MEDITECH hospitals, including the penalties for non-compliance.
- Ability to identify potential sources of electronic health information (EHI) within a MEDITECH hospital; and learn how to assess their ability to use, access, or exchange EHI.
- Develop strategies to prevent information blocking and creating a methodology for data interoperability ensuring patients (and their providers) have access to all of the information they need to make informed care decisions.

1074 - Hardware Planning – Do's and Don'ts When Moving to Expanse

Track: Support & Technology

Presenters: Priscilla Sandberg, Nassim Abouzeid, and Frank Tollefson

Organization: Pure Storage; MEDITECH; Tegria

Scheduled: Thursday June 8 at 1:30 pm

If you are planning on going to Expanse from MAGIC, Client/Server or 6.x, there are few challenges you need to understand about the new infrastructure you will be running. Join us to discuss the major differences in platform infrastructure and some of the adjustments that customers can anticipate making when moving to Expanse. We will also be discussing the best practices behind the infrastructure design, data protection and ongoing system support.

Learning objectives:

- Learn about the infrastructure differences between MEDITECH platforms with a concentration on moving to Expanse.
- Learn the philosophy behind the hardware design of Expanse from the addition of the internal VDI, to protecting the system and data on the back end, and why things are designed for optimal performance.
- Learn best practices and tips to maintain your Expanse system and anticipate growth in the upcoming years.

Priscilla Sandberg was named Healthcare Alliances Executive for Pure Storage in 2018. With over 20 years field experience, Priscilla has worked directly with physicians and provider organizations in both the payer and EMR space. Managing provider networks and physician credentialing for an HMO in the State of Michigan, Priscilla was responsible for maintaining and growing the participating provider base with an emphasis on timely claims payment and authorization education. During her 16-year tenure as Sales Executive at MEDITECH, Priscilla developed and managed a territory consisting of the upper Midwest as well as international business development in the Caribbean. Most recently, Priscilla was tasked with expanding Pure Storage's Healthcare Vertical, with the goal of providing state of the art storage infrastructure to organizations, ensuring that clients have the tools to meet the ever-changing data capture and reporting requirements of today's healthcare environment. She has a Bachelor of Arts degree from The University of Vermont and a Master of Social Work in Healthcare Administration from the University of Michigan.

Nassim Abouzeid is a Director in MEDITECH's Client Services division. He oversees the System Technology organization which consists of the Technical Account Managers (TAM), Technical Support Specialists, Technical Performance Analysts, and Computer Scientists. Nassim's organization plays a role in many different facets of technology. His group is responsible for system level performance and stability, Build/support of MEDITECH infrastructure, and technical type projects. During his 27 years with MEDITECH, Nassim has worked and supported all platforms in various roles at MEDITECH.

Frank Tollefson is the Senior Director Technical Services at Tegria with 20 years of MEDITECH server and network implementation, HIS/EHR design, build, configuration and support experience. He possesses strong MEDITECH Hosting and On Premise Infrastructure experience, has demonstrated Network Planning and Consulting expertise, and utilizes expertise to guide facilities in completing complex projects on time and within financial constraints.

1075 - The Impact of Drug Diversion on the Healthcare Industry and Ways to Prevent It

Track: Business Intelligence, Quality Management and Reporting

Presenter: Carolyn Bourke

Organization: iatricSystems

Scheduled: Saturday June 10 at 10:10 am

Drug diversion is still a major problem within the healthcare industry and carries with it major consequences. These consequences can lead to serious issues for a hospital, ranging from fines to devastating lawsuits. But reigning in drug diversion is more important on other levels, such as ensuring patient and staff safety and public safety by making sure diverted substances do not freely enter the community.

In this session, we uncover the answers to the big questions surrounding drug diversion:

- Why is drug diversion a problem in hospitals across the US?
- How prevalent is it?
- What does drug diversion cost hospitals when incidences occur?
- How can hospitals combat this issue?
- What are the ultimate outcomes?

Please join us for this educational session on how drug diversion can be a costly occurrence for your organization, however, it is one that can be dealt with in the right manner so that you can prevent it from disrupting you from helping your patients.

Learning objectives:

- Describe the current issues around drug diversion in today's healthcare landscape.
- Identify ways hospitals can combat drug diversion.
- Present the outlook for the future when preventing drug diversion in the hospital.

Carolyn Bourke is a registered nurse with more than 35 years of experience in various nursing roles and healthcare IT. She earned her BSN from Grand Canyon University and is a member of the International Healthcare Facility Diversion Association (IHFDA) and the National Association of Drug Diversion Investigators (NADDI). She joined iatricSystems 11 years ago as a Product Consultant and is now the Product Manager for Detect Rx, our drug diversion monitoring product.

1076 - Cybersecurity for MEDITECH Hospitals

Track: Support & Technology

Presenter: Pat Harkins

Organization: Teknicor

Scheduled: Friday June 9 at 10:10 am

Healthcare organizations and patient care can be drastically impacted by data breaches. Digital health innovation can only be achieved with effective data security in place. Working with leading MEDITECH hospitals across the globe, we have direct insight from the field into the data security risks hospitals

face, along with proven solutions. We will provide insight on observed customer field results combined with recognized best practices. Learn how effective protection typically requires a combination of management ownership, education, processes, and technology.

Learning objectives:

- Full awareness of the known and unknown risks around cybersecurity.
- Practical strategies and tactics to address risks.
- Examples from actual client experience.

Teknicor's VP Strategy, Pat Harkins, is a former hospital CTO and adds his direct experience in client engagements. The result is practical, up-to-date insight on security for healthcare organizations.

1077 - MEDITECH Expanse: Are Rules Driving Your Clinical Documentation?

Track: Expanse

Presenter: Angela DePas

Organization: CereCore

Scheduled: Thursday June 8 at 2:20 pm

What's the formula for success in MEDITECH Expanse when it comes to clinical documentation? Rules. Adding rules to documentation sections can improve clinician workflow and improve data integrity. See examples of how rules can help drive clinical documentation – saving your clinicians time while improving reporting and data analysis. And, with these best practices in place, rules have the power to improve revenue.

Learning objectives:

- Benefits of EHR optimization and why it is important.
- High-level overview of types of rules and uses.
- How the use of rules can improve workflow, data integrity, and revenue.

Angela DePas, Sr. Consultant, CereCore has 25+ years of healthcare experience and 20+ years of healthcare IT experience . She has skills with advanced NPR Report Writer and Screen developer, Report Designer and M-AT Rules, and has developed an M-AT rules catalog.

1078 - Data Repository: Creating Your First SSRS Report

Track: Population Health & Analytics

Presenter: Stacey Collins

Organization: The HCISolution

Scheduled: Friday June 9 at 10:10 am

We will take you through learning the basics of SSRS to get started writing your first report. Topics will include:

- What is SSRS?

- Prerequisites for setup
- How to get started
- Defining the Datasource and Datasets
- Using Report Builder to create your first report
- Publishing to SSRS
- Report print options print to screen, to page, export to file
- SSRS Report Subscriptions

Learning objectives:

- Demonstrate how to access the SQL Server Integration Services (SSIS) tools through Visual Studio and use them.
- Create an SSIS package by defining the connections, control flow, and data flow.
- Execute an SSIS package to save data results to a text file.

Stacey Collins, Director of Data Services at The HCISolution, began her career in healthcare IT in 2001 after graduating with a Bachelor's degree in Computer Science. While at MEDITECH, she worked as a Programmer/Analyst in support and development. In her desire to further improve the customer experience, Stacy worked as a Development Designer providing input toward the development and design of applications. Having fulfilled the software side of healthcare, Stacey's passion for the industry led her to complete a Master's degree in Bioinformatics helping her understand the science behind the medicine. Stacey is customer focused and applies her strong technical skills in a variety of ways to meet the needs of the customer.

1079 - Access and Convenience: How Phoebe Putney Designed its Digital Front Door

Track: Patient Engagement

Presenter: Ginger NeSmith, Phillip Wright, and JJ Lane

Organization: Phoebe Putney Memorial Hospital, Albany, Georgia; Phreesia

Scheduled: Friday June 9 at 10:10 am

Your EHR plays a critical role in supporting billing and clinical documentation. But is it enabling the experience that patients expect? During this session, we will share how Phoebe is building a digital front door that complements its MEDITECH EHR and enables a more convenient, streamlined patient experience. We will discuss how their health system is reducing barriers to access by leveraging self-service technology, and using text messaging to communicate more easily with patients and remind them about their appointments.

Learning objectives:

- Gain best practices for implementing digital registration and communication tools.
- See how Phoebe is building a digital front door that adds convenience while limiting staff burden.
- Learn how about our path to innovative solutions.

Phillip Wright, II, is currently the Interim Corporate Director of Patient Access for Phoebe Putney Memorial Hospital. He started his career with patient access in 2008 and has progressively moved into his leadership capacity. Phillip is a results-focused, quality-driven healthcare professional with experience

in financial and operational management. He is highly analytical and has the ability to streamline operations and maximize efficiency.

Ginger NeSmith is the Financial Applications Manager in the Information Systems Department at Phoebe Putney Health System in Georgia. Ginger has leveraged her seven years of customer relationship management experience with IBM ever since transitioning to healthcare fourteen years ago. In that time, she's partnered with health system revenue and finance teams to successfully implement multiple applications and workflow initiatives.

JJ Lane is an Associate Director, Market Development, at Phreesia, where he leads the health system strategy and operations team. Prior to working at Phreesia, he led account management and product strategy at Medumo, a patient engagement startup acquired by Philips Healthcare.

1080 - Price Transparency and AI Tools in Expanse to Improve Clinical Quality and Prescription Fill Rates for High-Risk Patients

Track: Expanse

Presenter: Jason MacLaughlin

Organization: Berkshire Health Systems, Pittsfield, Massachusetts

Scheduled: Saturday June 10 at 8:30 am

Many healthcare organizations struggle incorporating a patient's medication history into their record, in fact 84% of all sigs need to be edited prior to being entered into the chart. Often times this is due to incomplete, missing, or inaccurate data. Another prevalent issue is nomenclature differences between the interfacing systems. For the past year or so Berkshire Health Systems (BHS) has implemented tools that use AI to translate the incoming data to our data conventions. These tools have saved thousands of hours of our provider's time and has significantly increased accuracy.

Another concern for our patients and staff is the high price of medications are a major deterrent for patient medication compliance. If a patient deems a medication too expensive, they are less likely to take them as prescribed. Studies have shown that a patient is five times less likely to fill a prescription that costs \$90 opposed to one priced \$30. This non-adherence has significant negative impacts patients' outcomes with an estimated 125,000 avoidable deaths due to prescription non-adherence annually. BHS has implemented Real-Time Prescription Benefit tools to allow our providers and patients make the best choices to enhance medication adherence. The use of these tools has led to increased medication fills and patient satisfaction.

Learning objectives:

- Educate the audience on the impact of AI tools and the price of prescription drugs on medication fill rates.
- How to leverage AI tools and Real-Time Prescription Benefit tools in MEDITECH Expanse.
- Demonstrate how utilization of AI tools improves efficiency and how RTPB at Berkshire has impacted medication fill rates.

Jason MacLaughlin MPA/H has been the Manager of Clinical Applications at Berkshire Health Systems since June of 2020. Prior to his current position he worked as a consultant for approximately 20 years and has over 25 years of MEDITECH experience in all types of settings. He is also a member of the MUSE Education Committee.

1081 - MEDITECH Data Repository and Cloud Computing

Track: Other

Presenters: Jeff MacDonald and Chris Berlette

Organization: Waypoint Centre for Mental Health Care, Penetanguishene, Ontario; Ontario Shores Centre for Mental Health Sciences, Whitby, Ontario

Scheduled: Thursday June 8 at 2:20 pm

Three of the four specialty psychiatric hospitals in Ontario partnered to create a mental health cluster and share one instance of the MEDITECH electronic health record including the shared SQL data repository (DR). Through the creation of this cluster, it became apparent that near real-time reporting from the shared DR required a clear governance strategy. The three organizations worked to establish a structured – Data Management Working Group (DMWG) which facilitated the increase in quality and consistency of practice and usage of the shared DR across the partnership.

The initial architecture included transactional replication, with each site having their own independent Business Intelligence (BI) reporting environment to serve their respective customers. While this worked well for each site to manage their report and data model development for their specific organizational needs, there were challenges experienced in relation to cross-organization collaboration amongst the Data & Analytics (D&A) teams. This was viewed as a lost opportunity to have a standard Business Intelligence and Analytics development process and lead to a multi-site project to attempt to find a solution.

Through the DMWG the three organizations submitted a request for proposals from external vendors to establish a shared D&A environment. The result was an awarding of the project to a vendor that recommended moving to a cloud-based solution. Over the span of two years – starting in 2021 – the D&A teams at each organization began their transformation into a single D&A team, leveraging a variety of collaborative tools and services in the cloud that would allow for convenient sharing of BI solutions, building efficiencies and enhancing the services provided to end-users. Instead of three independent D&A environments, there is now a single environment that users from all three organizations use to access their various data and analytics needs.

Learning objectives:

- Creating a mental health cluster and sharing one instance of the MEDITECH electronic health record including the shared SQL data repository.
- Optimizing the DR across multi sites using SQL Replication services.
- Leveraging a variety of collaborative tools and services in the cloud that would allow for convenient sharing of BI solutions, building efficiencies and enhancing the services provided to end-users with Data Repository data.

Jeff MacDonald has been a data professional for 20+ years with experience in data warehousing and BI development, and Microsoft Cloud Services (Azure & 365).

Chris Berlette from Ontario Shores Centre for Mental Health Sciences, Whitby, Ontario.

1082 - Achieving a “Single Pane of Glass” View of Cybersecurity Risks

Track: Support & Technology

Presenters: Miroslav Belote and Scott Mattila

Organization: Valley Health System, Ridgewood, New Jersey; Intraprise Health

Scheduled: Friday June 9 at 9:20 am



The need for more optimized cybersecurity risk management and compliance has become a foundational concern for hospital CIOs and CISOs. The ever-expanding hospital IT portfolio has created a large volume of cyber risks and compliance issues both from internal operations and, especially, third-party vendors. This difficult risk management environment leads to a seemingly unsolvable challenge: How do we secure our hospitals against unknown cyber risks?

Healthcare CIOs and CISOs struggle with cybersecurity risk management because of the demand for technology solutions in all aspects of clinical and business operations which brings with it inherent security, privacy, and compliance risks. Under-resourced security teams struggle to achieve HIPAA Security compliance across their entire enterprise, as mandated by OCR, let alone protect their data assets from cyber criminals. Executives and the Board of Directors are demanding a holistic view of the hospital’s cyber risks for enterprise risk management and cyber insurance purposes. IT and security leaders want to engage in executive-level discussions equipped with meaningful reports and dashboards about important risks to the organization so they can gain alignment and additional investments for their cybersecurity needs.

Ultimately, in order to manage these risks, what is required is a holistic cybersecurity and compliance risk management approach. Integrated Risk Management (IRM) is the process of managing enterprise-wide security risks through a “single pane of glass” view. IRM builds the needed capabilities to unify risks from disparate risk assessment sources such as HIPAA, cybersecurity, PCI, technical/penetration testing, medical devices, applications, and most importantly, third-party risks so they can be monitored, analyzed, and managed to a targeted risk level.

We will present why Valley Health System adopted an IRM-based approach to its risk management program. We will provide an overview of IRM, challenges it addresses, capabilities it provides and approaches to achieving it. Learn how to implement an IRM program and manage each risk from “cradle-to-grave” with precision. The result is a highly responsive, scalable, and resilient security risk management program that can be optimized by any organization to reach its cyber risk management goals.

Learning objectives:

- Describe Integrated Risk Management, why Valley Health adopted this approach to managing cyber risks and the problems it solves for those managing security programs in hospitals and health systems.
- Identify how to get the most out your risk and vulnerability assessments, even from static documents and disparate sources of risk, as well as the criticality of creating “cradle-to-grave” remediation, mitigation, and exception-management workflows.
- Describe how a normalized risk register, built on the latest NIST standards, allows you to truly understand your risk posture to achieve your risk management objectives.

Miroslav Belote, Director / Chief Information Security Officer at Valley Health System in New Jersey, is responsible for developing and managing Valley Health's IT security strategy, incorporating technology and process improvements to achieve short- and long-term objectives. He is highly effective and respected IT leader with 20+ years of healthcare IT experience in security and infrastructure. He has proven success in building and managing highly reliable and high performing teams, resulting in successful and timely delivery of major initiatives and projects.

Scott Mattila, MHI, MIS serves as Chief Security Officer at Intraprise Health specializing in health IT, Security, Technology Audit, Compliance, and IT Management Professional with over 10 years' experience in both the Public and Private Sectors. He has previously held senior management roles in the area of cybersecurity and compliance at Highmark Health and UPMC. Scott also serves as an adjunct professor at Duquesne University and an MHA Advisory Board Member.

1083 - Elevating Forms Management: How to Streamline Process and Enhance Compliance

Track: Business Intelligence, Quality Management and Reporting

Presenters: Dessiree Paoli and Kaylee Dobbins

Organization: Interlace Health; Amberwell Health, Atchison, Kansas

Scheduled: Friday June 9 at 9:20 am

With pressure from COVID-19 straining HIM departments, we will share knowledge and best practices from forms experts with you in this in-depth session. The current state of patient forms management is full of challenges and compliance issues, and many hospitals don't know where to start.

Learning objectives:

- How to improve the governance process and organizational structure related to forms management.
- How to create a charter and forms committee.
- How to develop a standard request process and form structure/layout.
- How a digital forms library and eSignature process can eliminate many challenges

Dessiree Paoli is the Director of Product Marketing at Interlace Health, a healthcare IT company that is solving common workflow challenges for staff with integrated eForms and eSignature solutions. Dessiree has 20 years of experience in developing strategic marketing plans, leading teams, and driving integrated campaigns. A passion for helping people led her to the healthcare industry, where she has been expanding her skills for more than 14 years. Dessiree enjoys uniting cross-functional project teams, translating complex information into consumer-facing stories and public speaking engagements.

Kaylee Dobbins is currently the Manager of the Health Information and Patient Financial Services departments for Amberwell Atchison. She currently has her registered health information technician credential and is working on her master's degree in business administration.

1084 - CMS and ONC Regulatory Landscape for 2023 and Beyond

Track: Business Intelligence, Quality Management and Reporting

Presenter: Shoshannah Gil

Organization: MEDITECH

Scheduled: Thursday June 8 at 1:30 pm

The pace at which the U.S federal government continues to evolve the Centers for Medicare and Medicaid (CMS) Promoting Interoperability and Quality Payment Programs and the Office of National Coordinator (ONC) for Health IT regulations continues to pick up speed.

We will discuss the latest requirements for 2023 and 2024 based on the current rulings, including United States Core Data for Interoperability (USCDI versions 1, 2, and 3), Electronic Health Information (EHI) Export, electronic Case Reporting, Antimicrobial Use and Resistance Reporting, Social Determinants of Health, and more. We will then explore how the requirements are met using MEDITECH Expanse workflows. We will also touch on proposed rulings and how these may impact future requirements.

Learning objectives:

- Become familiar with the 2023 requirements for 21st Century Cures, Promoting Interoperability, and Quality Payment Program MIPS, and how they can be achieved in MEDITECH Expanse.
- Look ahead at CMS and ONC requirements and proposals for 2024 and beyond.
- Learn what steps you need to take in MEDITECH to be prepared for 2023 and future performance years

Shoshannah Gil is a Senior Supervisor, Regulatory Programs with MEDITECH.

1085 - MEDITECH System Optimization – Utilizing Tools to Monitor & Ensure Optimal System Performance

Track: Business Intelligence, Quality Management and Reporting

Presenter: Nassim Abouzeid

Organization: MEDITECH

Scheduled: Friday June 9 at 1:20 pm

As hospital systems and healthcare institutions ecosystems continue to evolve it is important to ensure the infrastructure is up to date, secure, and optimized. Healthcare organizations are beginning to leverage different technologies to ensure a highly available, secure system. This session will focus on tools available at your disposal to monitor and ensure optimal performance and stability of your MEDITECH system.

Learning objectives:

- Importance of system level patching to ensure a secure environment
- Leveraging different technologies for a Highly Available system
- Highlight monitoring resources for IT staff to ensure the MEDITECH system is performing optimally

Nassim Abouzeid is a Director in MEDITECH's Client Services division. During his 27 years with MEDITECH, Nassim has worked and supported many different platforms in various roles at MEDITECH. In his current role, he oversees the System Technology organization which consists of the Technical Account Managers (TAM), Technical Support Specialists, Technical Performance Analysts, and Computer Scientists. Nassim's organization plays a role in many different facets of Technology. His group is responsible for system level performance and stability, build/support of MEDITECH infrastructure, and technical-related projects.

1086 - Maternal Health and MEDITECH's EHR Excellence Toolkits: Obstetric Hemorrhage & Maternal Sepsis

Track: Patient Care

Presenter: Alana Commendatore

Organization: MEDITECH

Scheduled: Thursday June 8 at 3:10 pm

This educational session will help you understand how MEDITECH's Obstetric Hemorrhage and Sepsis Management EHR Excellence Toolkits can assist your organization in supporting maternal health and safety. You will learn how our toolkits align with the 2022 CMS changes to maternal sepsis screening criteria, can help to reduce severe obstetric complications in order to meet the new 2023 eCQM, and support attestation and subsequent designation as a Birthing-Friendly hospital.

Learning objectives:

- Understand the supporting evidence and components associated with MEDITECH's Obstetric Hemorrhage and Sepsis Management EHR Excellence Toolkits to address maternal health initiatives.
- Learn how the toolkits align with attesting to a Birthing-Friendly Hospital designation.
- Learn how to access and utilize the toolkit program materials and resources.
- Leave equipped with key concepts and tools to help your organization get started on your own obstetric hemorrhage management and maternal sepsis screening quality improvement initiatives.

Alana Commendatore RN, Manager, EHR Excellence Toolkit and Quality Projects has over 10 years of healthcare experience as a registered nurse, both in direct patient care across multiple healthcare settings, and as a leader in numerous quality improvement projects. In addition to leading and managing the development of MEDITECH's evidence-based outcomes-focused toolkits, she has also designed and implemented new processes to optimize clinical content development.

1087 - Care in the Right Direction: Care Compass

Track: Business Intelligence, Quality Management and Reporting

Presenter: Ashley Kennedy

Organization: Major Health Partners, Shelbyville, Indiana

Scheduled: Friday June 9 at 9:20 am

Major Health Partners was an early adopter of Care Compass, and will be sharing their experiences in deploying the solution to support their care management efforts. Hear about the construct and objectives of Major's care management services, and their workflows prior to the implementation. Follow along their journey to deploy Care Compass, and the efficiencies gained in their clinical operations for population health management. Expanse Care Compass is enabling Major's care teams to organize their workload, and ensure that patients are being followed across the continuum of care.

Learner objectives:

- Learn strategies for how to transition care manager workflows into Care Compass.
- Receive an overview of key features of Care Compass, including the home screen, patient assignment, worklist mode, care manager bulletin board and follow up.
- Hear the role Care Compass plays in a broader population health management strategy.

Ashley Kennedy is the Director, Information Services at Major Health Partners.

1088 - Expanse Population Health Management Solutions: A Winning Game Plan

Track: Population Health & Analytics

Presenter: Rachel Wilkes

Organization: MEDITECH

Scheduled: Friday June 9 at 10:10 am

Expanse features a variety of solutions that enable healthcare organizations to create a winning game plan for effectively managing their patient populations. Ranging from patient engagement, to care management, to provider workflows and analytics, Expanse features tools that can be leveraged to care for patients, cohorts, and entire populations. In particular, this session will highlight Care Compass and Population Insight.

Expanse Care Compass helps improve outcomes and reduce the cost of care by enabling care managers to identify and monitor cohorts of patients with the most pressing needs. Enterprise-wide patient registries leverage real-time patient data to flag care managers of situations so they can intervene proactively.

Expanse Population Insight features aggregated EHR, claims and HIE data to build a more complete picture of each patient's care journey. Algorithms are run on the aggregated data to generate insights relating to HCC risk and coding gaps, quality measure performance, care gaps, utilization, attribution, cost and social vulnerability. Those data points are surfaced in Expanse Chart widgets to be actionable at the point of care and within Care Compass Patient Registries for targeted care manager interventions. Data is also surfaced within Business & Clinical Analytics, enabling organizations to understand the disease burden of populations, examine utilization across all care settings, monitor quality, measure performance, and identify opportunities for gap closure.

Learner objective:

- Learn how MEDITECH's Expanse solutions work together to enable a comprehensive population health management strategy.
- Understand how Expanse Care Compass can be leveraged by those in care management roles to manage, engage and follow up with patients and cohorts.
- Discover the insights generated within Expanse Population Insight, when native EHR data is aggregated with claims and HIE data to widen providers' views of each patient's care journey.

Rachel Wilkes is a Director on the Strategic Product Management team. She has oversight over product strategy for MEDITECH's Analytics, Population Health, Patient Engagement, Revenue Cycle, Practice Management and Financial solutions. Over the course of her MEDITECH career, she has also served in various roles in Marketing. Rachel is a Certified Product Manager and holds an MBA from Bryant University.

1089 - Traverse Exchange Canada

Track: Interoperability/Integration

Presenter: Margaret McCormack

Organization: Queensway Carleton Hospital, CHAMP, Champlain Region, Ontario

Scheduled: Saturday June 10 at 9:20 am

Traverse Exchange Canada (TEC) is being implemented across the Province of Ontario to support the mandate of Ontario Health to provide a path to connect patients' health information to their care team through an integrated EHR. Implementing TEC will provide access to external records from acute care, long term care, primary care as well as provincial assets such as the Provincial Client Registry (PCR - EMPI). But this is not just about the technology – why do clinicians want this integration, how will they use it, how does it save time? These are the questions that will be addressed in this presentation.

Learning objectives:

- Learn about functionality available with MEDITECH's Traverse Exchange Canada.
- Learn about specific use cases being deployed through TEC.
- Look to the future in data consumption.

Margaret McCormack is a Registered Nurse, with Clinical Informatics experience spanning over 20 years. She is currently the Senior Project Manager at Queensway Carleton Hospital, supporting the Ontario MEDITECH Collaborative as well as provincial projects such as TEC and MEDITECH/Ocean integration. Margaret is a healthcare IT professional with broad experience implementing, managing, and supporting IT teams and clinical information systems. She is especially interested in projects to improve access to clinical information for patients and their care teams across the province.

1090 - Achieving EHR Optimization Through eLearning, Collaborative, and Applied Technologies

Track: Other

Presenter: Carol Labadini

Organization: MEDITECH

Scheduled: Friday June 9 at 1:20 pm

How has technology (particularly eLearning) enhanced the utilization and proficiency of EHR solutions? What intended/unintended benefits and outcomes have arisen from eLearning adoption?

Attendees can expect to leave this session with specific eLearning deployment strategies with lessons learned from existing MEDITECH clients, and information on how to apply these concepts to their own EHR optimization efforts.

Learning objectives:

- Learn eLearning deployment strategies.
- Hear lessons learned from other MEDITECH clients.
- Learn about EHR optimization efforts.

Carol Labadini, Vice President, Client Services, is responsible for implementations of all MEDITECH solutions across the continuum. Ms. Labadini led the way for physicians to deliver the most advanced, patient-centric care to their communities through MEDITECH's web-based Ambulatory EHR. Under her leadership, the company is well-equipped to help customers smoothly implement their systems and provide better management of patient health in today's changing care delivery world.

1091 - Managing Care Transitions as Care Navigators: Enhancing Communications Between Patients and Care Teams

Track: Population Health & Analytics

Presenter: Linda Nadeau

Organization: MEDITECH

Scheduled: Friday June 9 at 2:10 pm

MEDITECH's Care Compass solution helps to keep care managers at the center of patient activity, so they can more easily coordinate appropriate care for vulnerable patient populations between visits. We will show how this technology integrates with our other patient engagement offerings – including Ambulatory, Registries, Patient Portal, and Patient Connect solutions – and will demonstrate how it also complements our future MaaS Population Insight product.

Learning objectives:

- At the end of this session, attendees will have strategies for enabling chronic disease patients to manage their conditions more effectively.
- Improve patient outcomes.
- Realize reduced organizational costs.

Linda Nadeau, Director Client Services, MaaS Patient Engagement, MEDITECH, has been a MEDITECH employee for more than 23 years, serving healthcare organization clients as the primary point of contact for all operational issues related to the coordination of implementation planning and ongoing support.

1092 - Engage Your Patients and Save Time by Utilizing Patient Questionnaires

Track: Patient Care

Presenter: Linda Nadeau

Organization: MEDITECH

Scheduled: Friday June 9 at 10:10 am

MEDITECH's Ambulatory solution and Patient & Consumer Health Portal contain valuable tools aimed at increasing satisfaction and loyalty by encouraging your patients to actively participate in their healthcare journey. Learn how the use of integrated patient questionnaires increases communication, improves outcomes, decreases paperwork, and reduces registration lines.

Learning objectives:

- At the end of this session, attendees will have an appreciation for integrating patient questionnaires.
- Determining use cases to increase patient/caregiver communication.
- Decrease repetitive paperwork to improve registration time .

Linda Nadeau, Director Client Services, MaaS Patient Engagement, MEDITECH, has been a MEDITECH employee for more than 23 years, serving healthcare organization clients as the primary point of contact for all operational issues related to the coordination of implementation planning and ongoing support.

1093 - Where Interoperability and Innovation Take the Field

Track: Interoperability/Integration

Presenter: Mike Cordeiro

Organization: MEDITECH

Scheduled: Friday June 9 at 2:10 pm

The boost in the health apps space has redefined the healthcare ecosystem. Today, health apps are leading the charge in extending the reach of the healthcare industry by improving efficiency, communication, and quality of care improvements.

In the current healthcare paradigm, EHRs are not only judged on their inherent functionality but also for how well they connect with other systems. Greenfield Workspace is a natural extension of MEDITECH's open web environment and represents another critical step in MEDITECH's commitment to driving interoperability and innovation forward.

Through Greenfield Workspace, MEDITECH is renewing its commitment to Interoperability by offering app developers a platform to prototype and test apps that complement the Expanse EHR experience.

Learning objectives:

- Understand how Greenfield Workspace streamlines the app deployment process
- Learn about MEDITECH's FHIR and proprietary APIs
- Discover APIs that support use cases like Digital Front Door or User Provisioning
- Uncover how SMART App Launch Framework connects third-party applications to Expanse.

Mike Cordeiro is an interoperability strategist and thought leader, with more than 20 years experience devoted exclusively to healthcare IT, including over 15 years focused on the real-world deployment of interoperability products and solutions.

As MEDITECH's Senior Director of Interoperability Market & Public Strategy, he leads strategic interoperability initiatives, advances healthcare interoperability priorities, and drives the preparation and implementation of Interoperability solutions. Mr. Cordeiro is also heavily involved in MEDITECH's Greenfield and Traverse offerings, as well as MEDITECH's relationship with Commonwell Health Alliance® and other strategic partners.

1094 - Changing Culture: Implementing MEDITECH Expanse in Nairobi, Kenya

Track: Expanse

Presenters: Dr. K. Nadeem Ahmed and Terry Mitchell

Organization: The Aga Khan University; Huron Consulting Group

Scheduled: Thursday June 8 at 3:10 pm

Installing and deploying MEDITECH Expanse in Nairobi, Kenya was the first of a multinational implementation strategy with Aga Khan University (AKU) Hospitals. The overarching goal of each implementation is to create a fully integrated electronic health record and financial system for global data comparisons and tracking of health care with the primary goal to offer better, faster, safer, and less expensive health care.

Project leadership that assumes all team members and staff fully embrace implementing a new electronic health record system will encounter resistance and confusion in the decision to change from the existing system. Implementing MEDITECH Expanse affects change in each organization. While local processes, behaviors, and cultures differ, observations of changing culture are applicable in implementation.

Lessons learned in the AKU implementation will be shared include:

- a) Forever changing the trajectory and culture of health care in sub-Saharan Africa
- b) Changing the culture of MEDITECH to extend capabilities to provide services outside of mainstream US
- c) Changing the culture of third-party vendors to look for creative methods to offer services and integration of health care outside of US
- d) Changing the approach of the comprehensive implementation of MEDITECH Implementation teams and partners.

Learning outcomes – project leadership will be able to:

- Acknowledge and prevent culture shock caused by lack of information and the benefits of a new system

- Understand changes in delivering clinical care and benefits of improved outcomes and comprehensive medical care across internal and external health providers
- Understand changes in revenue cycle management, along with the integration of recording and reporting key data elements throughout the health system
- Understand changes in business and third-party vendors related to interconnectivity of external systems, both inbound and outbound

Dr. K. Nadeem Ahmed is the Chief Medical Information Officer for The Aga Khan University (AKU) and its global network of hospitals. He directs AKU's leadership in planning, implementation, and optimization of all technology systems that support the delivery of high-quality patient care, medical education, research, and to support AKU's overall strategic outlook. Recently, the AKU Hospital in Nairobi, Kenya went live with MEDITECH's fully integrated and web-enabled electronic health record (EHR) with profound clinical success. Along with establishing AKU's multinational Health Informatics department, Dr. Ahmed is actively planning their next EHR roll-out at a 1,000-bed teaching hospital in Karachi, Pakistan.

Prior to joining AKU, he served as the executive physician advisor to MEDITECH for implementation of their EHR products at numerous healthcare systems across the United States and internationally. Having closely worked with dozens of hospital systems over the past two decades, Dr. Ahmed has keenly observed that "we all seem to do the same work, but differently".

Appreciating the impact that technology has on people's lives, Dr. Ahmed has always been strong proponent of pushing technology to its limits to help improve healthcare. He believes that although health systems may "do the same work differently", the ultimate goals for better outcomes, increased efficiencies, and well-being of patients, healthcare providers, and educators are the shared values that unite us.

Terry Mitchell MHA, Healthcare Manager at Huron Consulting Group, has over 30 years of healthcare project management and revenue cycle management experience. He is well-versed with managing teams of varying skill sets and has in-depth knowledge of MEDITECH EHR implementation, training, process analysis and redesign, policy and procedure development, and change management. Terry has served as Global Program Director, Project Manager, Financial Lead, Revenue Cycle SME, Director of PFS, Director of Patient Access, Interim Director of HIM, CBO Manager of acute and ambulatory facilities, and Physician Practice Administrator.