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Time to Raise the Bar and Provide Healthcare Consumers With Data and Communication

BY DAVID BYRD

We've seen our share of large non-healthcare corporations move into the healthcare space, including the radiology market, over the years. Some public companies and some private companies with proven business models and successful product offerings within their own target markets. For example, in the mid-90s Reynolds and Reynolds entered the revenue cycle management space with the intent to offer billing systems to radiology groups, imaging centers, and billing services. At the time, any investor that knew Reynolds and Reynolds probably thought it was a good idea for the company to diversify into other markets outside of the automotive industry leveraging their long, historical business success. Quick history lesson: Reynolds and Reynolds has been in business since 1866, operating out of Dayton, Ohio, and was once a public company that dominated the worldwide automotive industry, delivering standard accounting forms and systems for automotive dealerships. Fast forward to 1994, Reynolds and Reynolds enters the healthcare market by acquiring PD Medical Systems and continues the acquisition spree, buying up several private billing system vendors that were on several

different hardware and software platforms. A short six years later, the company sells off the healthcare division at a loss due to a lack of profitability, which then becomes InfoCure, then VitalWorks, then AMICAS, and finally Merge Healthcare.

From a technology perspective, what's not attractive about healthcare? The U.S. healthcare market is a big market, close to 20 percent of the nation's Gross Domestic Product (GDP). Dealing with the human species from a diagnostic standpoint, there are countless ways healthcare information technology (HIT) can address a host of challenges within the diagnostic markets. And unless we evolve into a species that can self-repair and heal bone fractures, diseases, etc., the healthcare market is a pretty good market to be in whether you are an employee or employer.

I've written in the past about the slowness of technology adoption within healthcare, but if you have been even remotely paying attention to our industry you know we have gone from being an adoption snail to an industry that is being fed technology solutions at a blistering pace, gaining the attention of some very large, very successful companies like Apple, Google, and Qualcomm. Then you have the business to consumer companies that are

starting to disrupt the way healthcare consumers are being seen by physicians and physician assistants.

A few months ago my daughter had a 101 degree fever. I dialed her pediatrician's office number and was greeted with a prompt "can you please hold" before I could pronounce hello. Ten minutes later a different receptionist identified a wait time of three hours before a physician could see my daughter. Unbelievable, I thought. I launched Google from my wireless connection and typed in www.cvs.com. My daughter was diagnosed and had a care plan twenty-five minutes after I signed on to the CVS website. I was even provided fees based upon my insurance policy, what my payment responsibilities would be, which CVS location (with directions) had the shortest wait time—all without a single verbal word being spoken and prior to getting into my car to take her to the visit. By the way, we waited in the "waiting room" for about three minutes.

I'm at Starbucks writing this article. (No, I don't think Starbucks is moving into healthcare, but I could be totally wrong about that!) Have you seen the latest Starbucks promotion: "No Time? No Line." I used it today. I ordered my non-fat latte via the Starbucks app, identified what location I would pick up my order, and paid for the latte within a matter of seconds—all from the convenience of my phone. I ordered a non-fat latte because according to my heart app on my iPhone I had only taken 2,656 steps and slept just under six hours the night before. Are you connecting the dots?

There is one single common denominator to the real-life examples that are provided above—connectivity. There have been several large non-healthcare corporations that have tried to enter into the healthcare market with proven technologies, which have epically failed. We are now seeing some of the largest corporations in the world enter the worldwide healthcare market and they are causing disruption, but from an entirely different approach. These companies are leveraging the healthcare consumer through technologies that have been in use for decades in their business environments. For those of you who are unaware of what a "healthcare consumer" is, historically we have referred to them as patients.

A patient is defined as a person receiving or registered to receive medical treatment. A consumer is defined as a person who acquires goods and services for his or her own personal needs. There is a significant difference in acquiring medical services, versus "receiving or registered to receive" medical services and this is why consumer driven companies are successfully entering into the

healthcare market and in a big way. Tim Cook, CEO of Apple, recently stated in a Forbes interview article that Apple sees the healthcare market as their biggest growth curve for the company. Consumer driven companies have had the technology infrastructure to distribute, organize, and measure the quality of their product on a very broad scale for years. This is unlike anything the healthcare industry has experienced to date by any "outsider." Technological disruption is being leveraged on the backbone of a 20-year-old plus a communication system called the Internet, but there is a huge difference in how these companies are leveraging the Internet.

Ever heard of a technology term called multi-tenancy? Multi-tenancy is a platform in which a single instance of a software application serves multiple customers. This is much different from a local server that has an individual database and an installed software program. Much different from Application Service Provider (ASP) solutions that connect to a version of a software program via the Internet to an individual database, per customer. With multi-tenancy each customer is called a tenant. Tenants are given the ability to customize parts of the application, such as business rules. This is very important to understand, because it is how these non-traditional healthcare companies are becoming very disruptive within the healthcare industry, which historically has been archaic and slow to adopt technology. Companies like CVS have implemented a multi-tenant technology infrastructure to support their business, making it extremely scalable, but more importantly they are in a position to support their consumers in a very robust way. Remember my CVS example? CVS enabled me to view all their stores within the United States, then allowed me to get even more specific by drilling down to locations that were close in proximity to my ZIP code. The multi-tenant technology then provided wait times, all on the backbone of the Internet. Think what this does for the CVS administrator responsible for wait times and billing within a region. He or she can benchmark patient flows, identify top billable procedures, denial and reimbursement rates, across a couple of local stores, the county, the state or all the CVS stores in the country, in real-time, *using a single platform and one instance of software*. No different from how I ordered my non-fat latte!

My orthopedic surgeon identifies that I needs to schedule a radiological exam for what appears to be a bulging C5. He indicates the radiology group that will be reaching out to me. Two days go by and I do not hear from the radiology group. A bulging C5 is not fun and two days

seems like a lifetime. I Google the radiology group and their website looks like something from the 90s. There is no way for me to schedule an appointment online, no fees show, yet they spend multiple millions of dollars on radiological equipment based upon the sub-specialist descriptions proudly displayed under “our radiologists.” I pick up the phone to make an appointment...two weeks later! I request my radiology report be emailed to me so my physical therapist can review it, since I have not heard back from my radiologist. The receptionist at the radiology group politely ask if I would like the images with the radiology report, which will be sent via U.S. Postal Service on a “CD.” I politely ask her, “What’s a CD?”

Next time you are in need of a new software update on your mobile device, or even if you’ve bought a laptop in the last five years, take a look to see if you can insert a CD. Multi-tenancy is a requirement for cloud-based products and this is what is causing disruption within our industry. Mobile devices and up-to-date cloud software companies have provided a conduit for mass connectivity through multi-tenancy platforms operating on a single software instance. We need to be cognizant of what drives markets and how technologies assist in driving paradigm shifts. We’ve experienced this before in radiology when PACS

moved to the cloud and coders gave up paper and pens to leverage cloud-based computer-assisted coding products.

Healthcare consumers and radiology consumers are starting to complain about hidden costs, lack of transparency, inefficient systems and billing complications. And why shouldn’t we? The administrative side of radiology is a market niche that is supported by non-multi-tenancy systems, or said differently, is in the exact same position as when Reynolds and Reynolds entered the market. Non-traditional healthcare companies are raising the bar by providing healthcare consumers with data and communication means through multi-tenancy cloud products—and unlike Reynolds and Reynolds they are doing it successfully. 



DAVID BYRD

is vice president of radiology market development, XIFIN Inc., and provider of cloud-based revenue cycle management solutions. David has nearly two decades of healthcare information, technology-related, and business development experience. He has been a longstanding member of the RBMA and Healthcare Information Management Systems Society. *David can be reached at (858) 793-5700 or dbyrd@xifin.com.*



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