



Incorporating Technology Into **Organizational Strategy**

Finding Success In A Changing Behavioral Health Landscape

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Credible Behavioral Health Software
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Introduction

Behavioral health executives are challenged to integrate technology into their strategic planning process. Health care policy, health plan requirements that now focus on value, and technology are continuously changing. To adapt to these changes, leaders of behavioral health care organizations need to consider a broader, more comprehensive technology strategy to allow them to navigate and compete in an evolving health care ecosystem.



Before executive teams begin this integration, three key considerations need to be addressed to ensure greater alignment between the organization and available technology capabilities. Behavioral health organizations first should consider their level of readiness necessary for technology deployment. Executives should also look at the vital electronic health record (EHR) features and functions required for today's behavioral health system. Completion of a thorough assessment can guide future technology decisions and strategy. *OPEN MINDS* has developed an online Strategic Technology Assessment to assist behavioral health executives in their planning process.

The focus of technology strategy in the behavioral health industry is shifting beyond the traditional EHR because of new service delivery options, payment models, and rising consumer expectations. When *OPEN MINDS* conducted the *2017 National Behavioral Health EHR Survey*, executives from across the country were asked about how they implement and optimize new technology.

Overall, results showed that many executives see their current EHRs as older and somewhat out of date, and time consuming to implement. Older EHRs lack the kinds of features they need to compete in the current value-based healthcare setting. However, respondents view cutting-edge EHRs as a necessary investment to help grow their organizations in the value-based payment environment while adapting to new service delivery models.

Technology Is Necessary In The Strategic Plan

To meet the demands of the changing health care landscape, executives of many organizations are adopting the necessary technology to compete and stay relevant in the behavioral health care market.

One of the most recent and widespread changes to the complex health and human services environment is the transition to Value-based Reimbursement (VBR). The best technology infrastructure supports organizations as they move from fee-for-service billing to VBR, where data tracking and outcome measures ensure payment for services rendered. Health plans are looking for long-term positive outcomes for their consumer and are redirecting a portion of the risk to the provider organization. Without the right technology in place, behavioral health organizations may not have the required functionality to capture, track, analyze, and demonstrate performance measures.

Another consideration is that technology offers ways to improve service delivery and increase consumer engagement in treatment. For example, telehealth gives consumers on-demand access to their health care provider as well as offering behavioral health organizations lowered costs by reducing “in-person” overhead and reaching harder to serve areas. An increase in covered lives due to the Patient Protection and Affordable Care Act (PPACA) and the adoption of technology by behavioral health care provider organizations has provided telehealth an environment to grow and be readily accepted by consumers. Mobile applications help community-based behavioral health organizations expand geographi-



cal service delivery reach and offer consumers more options to accessing quality care.

The most basic function of an EHR is data collection during a treatment episode. However, care is often provided outside of the four walls of a clinic, and EHRs need to ensure interoperability to and from external systems like patient registries, laboratories, and Health Information Exchanges (HIEs) – all within the bounds of Health Insurance Portability and Accountability Act (HIPAA) security and disclosure rules. Interoperability between disparate technology platforms strengthens care coordination and improves consumer outcomes by capturing the complete longitudinal client record across multiple care provider organizations.

When consumer data is collected and analyzed across the entire health ecosystem, provider organizations can manage population health much more efficiently. Seeing trends in service usage and identifying the “super-utilizers”

– the ~5% of people who use 50% of the health care resources – offers providers an opportunity to adjust the care plan to ensure the right intervention is being provided to the right person at the right time. Organizations that have adopted highly advanced, interoperable technology solutions are at an advantage when they can better diagnose conditions, select treatment goals and develop service plans, document progress towards goals and prevent medication error.

One way for behavioral health organizations to work through the challenges of integrating technology with their strategy is to assess their overall readiness to adopt new capabilities and to evaluate the effectiveness of their EHR current technology solutions. The Strategic Technology Assessment is a tool that can help start this process by facilitating leadership discussions about how well technology is adopted in the service environment and identifying the steps needed to improve the overall effectiveness of the EHR solution.

Technology Strategy Drives Innovation

Meeting the demands of payers as the behavioral health care industry moves to more value-based reimbursement models means executives have to examine ways to stay relevant, competitive, while meeting contractual requirements. Evaluating technology initiatives within the strategic plan is an excellent place to start as most payers want positive consumer outcomes which are most efficiently tracked within the EHR. Having effective technology solutions also offer the opportunity to capture efficiencies and improve productivity, thereby increasing financial margins. Maintaining a current technology strategy gives provider organizations the ability to improve service delivery, with systems that support telehealth or mobile applications. There are two aspects to evaluate: organizational readiness to implement new technology and the features or functions that technology should include.

➔ **Organizational technology implementation readiness** is an important baseline for behavioral health care executives because it sets the foundation for successful selection and implementation of innovative technologies. Careful and ongoing analysis of the technology used throughout the entire organization can improve service delivery and spur innovation. Organizations gain clear insights from this technology evaluation and are equipped to make more informed choices during the technology selection and implementation process.

➔ **New features and functionalities** in EHR systems should be routinely evaluated against what is required by payers and policy makers and what is currently available – either from the EHR vendor or a third-party source. Having a technology platform that is keeping pace with current payer requirements and consumer expectations gives behavioral health organizations a greater chance of staying relevant and competitive. An EHR is integral for several essential areas, including capturing data, analyzing and making data actionable, facilitating consumer engagement through self-service, and monitoring service effectiveness and organizational efficiency.



Determining Organizational Readiness For New Technology

A thoughtful, proactive assessment becomes the roadmap to a successful strategic planning session. Organizations should carefully consider all aspects of implementing new projects or services, which will enable behavioral health executives to execute the strategic plan. Technology is critical in realizing efficiencies, expanding into new markets and new services, and competing in the advancing value-based reimbursement business model. Identifying key resources and dedicated team members before starting the selection or implementation process offers organizations the best opportunity to succeed in undertaking such a large-scale project. There are ten key domains to consider when determining organizational readiness to implementing any new technology.



Executive leadership teams thoroughly invested in the implementation of an EHR, or any technology, set the tone for staff to endorse the system change. Leaders will be the primary driving force and provide oversight during a large-scale technology or EHR implementation. Having leadership committed to the process guarantees alignment between the EHR strategy and daily operational execution.

An internal communication plan gives organizations a resource that can assist in managing large-scale changes and help alleviate the stress of uncertainty. A communication plan effectively outlines the changes and establishes the strategic benefit of an EHR to stakeholders and staff. Open and honest communication shapes the change in a positive perspective within the organization and engages staff in a conversation about the benefits and challenges of the initiative. Two-way dialogue throughout the organization gives executives an opportunity to learn from front-line team members and incorporate their feedback early on in the process.

Consumer engagement is a key indicator of service effectiveness and can improve outcomes by keeping the consumer invested in his or her health and treatment. Selecting a technology platform that offers consumers an easy-to-use experience will improve their overall engagement level and retention. Care management and outcomes improve when consumers are better informed and are engaged in making proactive decisions that impact their health and wellbeing.

Policy, procedures, and workflows are established during the planning process. Executives need to consider what policies govern their organization, the procedures their staff must follow, and how the information flows through the system. Continuous process improvement and documentation activities create efficiency and enhance service quality, especially when linked to the functionality of an EHR.

Assessing Information Technology (IT) resources while still in the planning stages of selecting and implementing new technology will expose gaps in the current IT budget, resources, or talent. Behavioral health organizations should identify the required funding and resources before implementation. Upgrading technology with enhanced features, replacing the system or implementing an EHR for the first time requires a significant amount of time and dedicated resources before commencing the process.

Defining data management and integrity responsibility ensures that the data accumulated in the EHR is accurate for documentation and decision-making. Behavioral health care executives should analyze and delineate the processes for the data input and continuous quality review. The roles and responsibilities of the technology administrators and users need to be explicitly outlined during the strategic planning process.

The expected client outcomes to be tracked in the EHR are often based on payer policy and governmental regulation. Understanding the payer expectations of the treatment process ensures that the data accumulated and obtained in the EHR is accurate for documentation, compliance, reporting, and decision-making. Precisely established outcomes for each service documented in the EHR are necessary to provide that the right data can be collected and reported to assess the effectiveness of the services and to substantiate value-based reimbursement contracts.

Resources are assigned and available before the implementation of new technology or an EHR. Organizations should determine the budget, time needed, the number of staff, and necessary skills for maintaining and updating the EHR configuration. Consider the number of dedicated employees required for data analysis and reporting on an on-going basis. Team members with skills in data analysis and business intelligence reporting are necessary so that the data collected in the EHR is put into action by staff to improve services and to help executives monitor performance on key initiatives.

Clinical, IT, and quality assurance leadership all play a role in the planning of and implementing a new technology solution. Implementation of an EHR involves an increased level of staff time for testing and configuration, along with clinical, financial, quality and other staff training before “Go Live.” Once the EHR has been fully implemented and complies with all clinical regulations, management will need to monitor operations and quality review in an ongoing manner and empower the EHR vendor or IT department make configuration changes as conditions and regulations change.

Project management expertise is a critical element of technology strategic planning. Implementing an EHR is a large-scale project, with most EHR vendors needing 12-18 months from the start of the project to “go-live.” Project management functions cover numerous departments, such as financial, clinical, quality assurance, and IT. Selecting the right person or team to oversee the implementation process gives behavioral health organizations the ability to manage the process with greater efficiency and to control for inevitable changes in scope.

Integrating these ten steps into the strategic plan give behavioral health organizations the foundation for the successful deployment of technology.

Evaluating Current Technology Functionality

There are many aspects of new technology solutions and EHRs that are typically evaluated as part of the selection or implementation process. Behavioral health executives assess the specific technology functionalities needed now and in the future that align with the internal and external needs of the organization. These essential functions will be different based on the services provided and the reimbursement model used by payers. Any new technology or EHR should be flexible enough to adapt and change with new clinical services or payment methodologies.



Clinical Functionality In The EHR

Clinical functionality is the core of the EHR. Robust technology platforms augment the care experience while capturing necessary data that supports the organizations' daily operations. There are multiple elements to consider when assessing how well an existing EHR or other technology platform is supporting this crucial aspect now and adapt to future policy and payers requirements and reimbursement methods.

Individual Treatment Plans

Individual treatment plans within the EHR should allow users to record all individual service plans, including identified problems, treatment goals, objectives, and interventions used during sessions. As payers' requirements evolve for reimbursement models, organizations need to adapt their treatment plans within the EHR to match new specifications. Service plan functionality should support consumer-focused, mental health recovery model language and approaches and include the ability to have different versions by program. Robust treatment planning models allow the clinician to quickly identify the care delivery elements needed to treat the condition, comply with service authorizations of the payer and support outcome documentation.

Medication Management & Lab Reporting

Medication management and lab reporting functionalities within the EHR include medication monitoring, medical conditions and vital signs, medication administration records and reconciliation (eMAR), electronic prescriptions (ePrescribe), links to medication information, drug interaction and contraindications, alerts, laboratory interface results and alerts, and medication and informed consents. With more behavioral health organizations aligning with physical health, having these functions improve coordinated service delivery and allow care providers to treat the whole person.

Notes, Assessments, & Clinical Forms

Notes, assessments, and other clinical forms housed in the EHR need to be highly configurable to support the changing needs for documentation, data collection, outcomes tracking and reporting. Since many states and governing bodies have unique requirements, an EHR with customizable notes and forms allows the organization to meet the needs of individual program specifications best.

Satisfaction & Outcomes Tracking

Satisfaction and outcomes tracking functions within the EHR should have the ability to record date-sensitive, program-specific satisfaction and outcome data for consumers, as well as robust capabilities for analyzing this information. Behavioral health organizations can align satisfaction targets and outcome goals with payer requirements as well as use them to identify gaps in care.

Interoperability & Data Management

Interoperability and data management give users the capability to share data with other organizations with different EHR and technology systems while complying with HIPAA. The ability to exchange and use data throughout the care continuum, especially between specialists and primary care providers, is a key strategy for increasing quality care. Data sharing must be comprehensive, efficient, timely, and secure. Interoperability drives the coordination of care, both inside and outside the four walls of the organization and is essential to outcome assessment and documentation.

Clinical Decision Support Tools

Clinical decision support tools provide a robust infrastructure to aid clinicians and caregivers in the treatment and service planning processes. The tools should be available at the point of services and tightly integrated with the EHR. This function includes tools that assist in diagnosing conditions, selecting treatment goals, developing service plans, documenting progress toward goals, and preventing medication errors.

Consumer Portal

A consumer portal for engagement allows for shared decision-making between the consumer and care provider. It also offers secure functionality including the ability to log on to verify current appointments, schedule future visits, set reminder preferences, offer the ability for consumers, guardians and guarantors to log-on and request information electronically and tracking the release of this information, and the ability to make online payments. Comprehensive consumer engagement tools are integral to the concept of a person-centric clinical record, where the consumer is a partner in the care experience.



Billing Functionality In The EHR

Behavioral health organizations need solutions that support standard billing functions which are easily adaptable as health care policy and reimbursement rules evolve. There are many billing functions to consider, including specific payer business rules, financial eligibility, authorizations, services relating back to a particular billing code, as well as traditional fee-for-service billing, per diem billing, and bundled service rates.

Fee-For-Service Billing

Fee-for-service billing is the current standard for reimbursement contracts requiring the EHR to have full pre-billing (authorizations tracking, credentialing), benefits confirmation, electronic billing, electronic remittance reconciliation, general ledger interface, and accounts receivable analytics functionalities.

Bundled Or Case Rates

Bundled or case rates are the future of the behavioral health market. Movement to value-based reimburse requires increased data analysis to both ensure that the outcomes related to case and bundled rates are achieved, and to create the electronic claims for those services.

Other Value-Based Methodologies

Fee-for-service billing is the current standard for reimbursement contracts requiring the EHR to have full pre-billing (authorizations tracking, credentialing), benefits confirmation, electronic billing, electronic remittance reconciliation, general ledger interface, and accounts receivable analytics functionalities.

Report Functionality In The EHR

EHRs and other forms of technology that support clinical services collect a massive amount of data. Executives and clinical leaders are expected to access that data in a meaningful way. An EHR that has comprehensive reporting capabilities that can transform data into actionable information, give executives what they need to manage the operation, plan new services and create market advantage.

Data Mining & Analytics

Data mining and analytics are essential for ensuring compliance with regulatory and payer requirements, population health management and driving quality outcomes. Data mining is the process of sorting through large data sets to identify data patterns and relationships. Business Intelligence (BI) is the technology-driven process for analyzing data and automating reporting of key indicators for executive and management staff. Access to analytics allows executive and clinical leadership to proactively segment the population under care, identify what works (versus what does not) and adjust accordingly.

Report Writing

Report writing functionality within the EHR is comprehensive, easy to use, and allows reporting of all data elements in the system. This feature includes the abilities to write custom reports, write and use custom procedures, save and name report templates, run reports at scheduled times, control user access to reports, and create usable dashboards, as well as has a data dictionary of supporting documentation.

Dashboards

Dashboards provide behavioral health executives at-a-glance data analytics. Integrating the EHR and other technology solutions into secure and accessible management dashboards makes data actionable by providing information on key performance indicators and outcomes to leadership teams, and identifying high-risk consumers for population health management.

Mobility Functionality In The EHR

Mobile technology and EHR advancement have greatly helped community-based behavioral health organizations in their service delivery capabilities. Technology, payer requirements and consumer expectations are driving mobile technology adoption. Having mobile options for consumers permit access to care on their terms. Behavioral health organizations need to evaluate this feature in their existing EHR system, especially in legacy systems.

Remote Access To Client Data

Access to client data while in the field is a requirement for some types of care coordination and other community-based services. Mobile functionality must be efficient, reliable and instantaneous to be useful for staff. Forms, especially notes, should be easy to use, even on a cellular phone. Mobile access to the EHR increases productivity and streamlines workflow.

Disconnected Or Offline Access

Disconnected mobile use of the system is necessary where internet or wireless is unavailable or unreliable. Offline access to the EHR can create greater efficiency for community-based staff and reduce operating costs related to cellular data. Having offline access allows team members to download and review previous notes as well as take new notes during treatment sessions.



Additional Functionality In The EHR

EHR technologies continue to evolve as the health care landscape changes or as organizations change the way they do business or add new service offerings such as peer support, foster care, and employment services. As behavioral health organizations evaluate service lines and consider new ones or expanding them, executives need to know what a new technology solution can provide, which helps determine if a system is right for their organization’s mission.

Primary Care Integration

Primary care documentation and integration with behavioral health is an essential strategy for treating the whole person. The EHR should support strategies for integration through data exchange with primary care providers and inclusion of primary care documentation functionality. Behavioral health executives should evaluate the need to integrate with primary care providers through data exchange, and determine whether or not their software solutions include functionality required by primary care providers.

Health Home Management

Health home management services need functionality to aid in the development of consumer care plans that include both internal and external providers, reconciling all of a consumer’s medications, service authorizations and disclosure consents management and care provider data management.

Telehealth & Telepsychiatry

Telehealth and telepsychiatry functionality requires secure, portable access to consumer records and functionality that supports sharing of data between remote, contracted telepsychiatrists and the EHR where the consumer data is centralized. As psychiatric services become scarcer, having a telepsychiatry function in the EHR is critical for providing those services to consumers. Beyond psychiatry, tele-health also offers ways to augment service delivery systems, especially in places where waiting lists are standard, can provide outlets for people seeking care. In an age of on-demand service, digital applications that offer peer support or self-help models – delivered online – improve access to care and overall client retention.

Foster & Adoptive Family Services

Foster and adoptive family services require additional functionality in the EHR including referral and recruitment tracking, family recruitment metrics, placement history, matching capabilities, bed “hold” capabilities, respite bed tracking, frequent visitor tracking and payment. The system should also track the complete placement history of children in foster care and match children with potential foster and adoptive families based on key factors such as bed availability, certification, and license types, racial and religious preferences, location, etc.

Employment Services

Employment services call for tracking employers, consumer employment history, job counseling, training, and service authorizations from employers. Other considerations include tracking a broader array of services used to support consumers in their employment and daily activities, including dependent care support services, wellness services (such as nutritional and fitness coaching), and legal and financial services.



The Results Are In – What Your Results Mean For Your Organization

The *OPEN MINDS* Strategic Technology Assessment provides direction for behavioral health executives on which to base future action. Completion of the Strategic Technology Assessment produces a report that describes the readiness of the organization to implement a technology project and the overall performance of the currently deployed EHR technology platform.

Organizations can review the results as an indicator for next steps and should represent the perception of executive management. As a qualitative instrument, data points should also be collected around revenue performance, overall IT partner performance (outstanding support tickets, time to fix, etc.) and general user acceptance of the technology currently in use. With this holistic view in hand, the organization can then proceed to act upon the results.

So, what does this mean to executives of provider organizations in the behavioral health community?



First, organizational readiness for technology implementation is critical and scores less than 50% indicate that proceeding on a major project has a high likelihood of failure or best case, substantial delays in deployment. Organizations without a plan should remember the adage: “A failure to plan is to plan for failure” and focus on developing executive sponsors and their strategy.

Second, for organizations that have a readiness score over 50% and an overall needs score of under 50%, they should fill the readiness gaps and consider what they can do to improve the overall effectiveness of their EHR technology platforms. And here they have several options:

Upgrade their solutions through leveraging their current technology partner, ensuring their solutions are at the most current version and building or adding components that make the EHR more effective. Most technology partners have robust product roadmaps to ensure their solutions stay current, adding features and functions on a regular basis. The first action any organization should take it is to reach out to their current partners and, if possible, align with their product roadmap.

In the event alignment is not possible, the next step maybe to configure additional functionality through technology user tools that may exist within the current EHR. New data fields, workflows and inquiries configured to meet new requirements are often possible within most EHR technology solutions.

Consider specific technology solutions to meet specific needs that can be added to the current technology solution. Examples here include digital application, mobile applications, e-prescribing, analytics and interoperability products that can be integrated with the existing EHR.

The final option is the replacement of the EHR with a new solution and for this choice, organizations should consider the time, effort and resources required to do so.

Are You Ready To Start The Strategic Technology Assessment?

Readers of this white paper are invited to evaluate their technology strategy and see if their existing EHR is meeting their requirements by taking the *OPEN MINDS* Strategic Technology Assessment. The short survey assesses readers' technology or EHR readiness and implementation process. It will also evaluate the additional functions needed in EHRs and how well current EHRs are meeting existing functionality requirements based on the changing health care landscape. At the end of the survey, there is a detailed report demonstrating readiness for implementing a new EHR or other technology and how well the EHR is meeting functionality requirements. This report can be used as a starting place to ensure that readers' technology strategy is aligned with the changing behavioral health care market. The Strategic Technology Assessment is free for anyone to use thanks to the support of Credible Behavioral Health Software. <https://www.openminds.com/strategic-technology-assessment/>



About Credible Behavioral Health Software

Credible Behavioral Health Software provides secure, proven, easy to use software for clinic, community, residential, and mobile care providers across the United States. Credible's commitment to innovation, ease of use and optimization runs throughout our company and our software. Fully integrated and seamless, Credible provides clinical, scheduling, billing, form management, eRx, eLabs, mobile/field, reporting and business intelligence modules.

Credible is a leading innovator in web and mobile solutions for behavioral health. Founded in June 2000, Credible is based in Bethesda, Maryland and services care providers throughout the United States. Since 2000, Credible has provided software solutions for Behavioral Healthcare and other Human Service providers. Credible is proud to provide solutions for wide spectrum of behavioral health services including Youth, Residential, Adult, Community-based, Crisis, Forensic, Mental Health Court, Clinic, ACT and wrap-around services.

Additional Resources

For additional information on incorporating technology into organizational strategy, please review the following articles:

1. Oss, M. (2018, March 26). Moving EHR Investments From 'Must Do' To 'Must Have.' Retrieved from <https://www.openminds.com/market-intelligence/executive-briefings/moving-ehr-investments-from-must-do-to-must-have/>
2. Oss, M. (2017, December 15). Technology Moves From Compliance To Strategic – The Three Tech Mega Trends Of 2017. Retrieved from <https://www.openminds.com/market-intelligence/editorials/technology-moves-compliance-strategic-three-tech-mega-trends-2017/>
3. Oss, M. (2017, October 4). Building A Technology Infrastructure For Value-Based Care: Tech To Support Performance Management. Retrieved from <https://www.openminds.com/market-intelligence/editorials/building-technology-infrastructure-value-based-care-tech-support-performance-management/>