

A Step-by-Step Guide to Successful Test & Blood Utilization

How innovative healthcare organizations can plan, implement, and grow successful test and blood utilization programs to drive cost savings, profitability, and better patient care.

McLaren's Utilization Governance Committee



Dennis Spender, MD | Chief Medical Officer | McLaren Health Care

Dr. Spender is a seasoned healthcare leader with over 20 years of experience under his belt. He has served on multiple boards and hospital committees dedicated to driving safer, healthier outcomes for patients. Dr. Spender is a member of the College of American Pathologists, the American Society of Clinical Pathologists, and the American Association for Physician Leadership.



Diane Janowiak | VP of Premium Client Solutions | hc1.com

As VP of Premium Client Solutions at hc1, Diane is responsible for ensuring the healthcare organizations that rely on hc1 for solutions achieve their goals. Her 27+ years working in laboratories before joining hc1 have made her a go-to thought leader on driving quality and efficiency in all areas of healthcare, all while grounding her success in low-cost, high-quality care.



Tim Hannon | Chief Executive Officer | Healthcare Forward LLC

Dr. Tim Hannon, CEO of Healthcare Forward, is an anesthesiologist and patient safety expert with over 20 years experience leading large-scale transformation initiatives to improve the safety, quality and efficiency of healthcare across the nation. He is recognized for bringing leading-edge blood and test utilization initiatives to organizations of all sizes, and partners with health systems to implement comprehensive high-value programs.

Driving Quality Care through Utilization

In today's quality-driven, outcomes-focused healthcare landscape, health systems must be able to drive better patient outcomes and enhance hospital efficiencies while still controlling overhead costs. Many forward-thinking organizations are turning to utilization programs to proactively address these issues without sacrificing quality patient care. Utilization programs put operational processes under a microscope and turn lagging, outdated workflows into lean, money-saving activities.

A utilization program is a long-term, cost-effective way to initiate large-scale change in a healthcare organization because it goes beyond just surface-level strategy and focuses instead on foundational processes that can make the biggest impact – unnecessary testing and excessive blood waste. Strong test and blood utilization programs enable health systems to:



Gain 100% visibility into all test ordering behaviors to take action and drive positive change around appropriate lab ordering.



Confidently track utilization metrics to measure the reduction of unnecessary high-cost, inappropriate, or duplicative tests, as well as blood waste inventory.



Increase patient satisfaction by ensuring the right test is being ordered at the right time for the right patient.

This 3-step guide walks through exactly how innovative healthcare teams can establish long-term, cost-effective test and blood utilization programs in their health systems.

STEP 1



Recognize the current state of test and blood utilization in your health system.

Before any actual utilization processes can be built or implemented, the overarching problems must be identified. Gathering, organizing, and analyzing this data in a new way can be extremely eye-opening for health system executives, and is instrumental in garnering internal support across all levels for a large-scale utilization initiative.

The two main areas of utilization most organizations focus on first are test utilization and blood utilization. For test utilization, project leaders should be able to understand exactly how tests are being ordered, how often these orders come through, and the overall volume of these tests. Specific attention should be given to high-cost tests, outdated or antiquated tests,

and unnecessary tests (those that don't provide any medical value).

Blood utilization metrics, on the other hand, deal almost exclusively with overall volume and usage rates. Nearly 50% of all blood transfusions are inappropriate or medically unnecessary, although many healthcare leaders are completely unaware of how their particular health system is handling blood volume. Blood products and blood transfusions are typically not reimbursed for inpatients and are minimally covered for outpatients, turning this seemingly life-saving product into a costly procedure.



Remember:

→ Unnecessary testing and blood waste put a huge financial strain on health systems. Over \$340 billion is spent every year on excessive and inefficient care services, while nearly 50% of all blood transfusions and lab tests run across the continuum of care are unnecessary. How is your health system addressing this waste?

What to keep in mind during this step:

Stay high level. If utilization data is too granular in the beginning, it can be overly complicated and hard for important stakeholders to understand. Instead of zeroing in on individual physician ordering behaviors in a specific department, show the overall percentage of unnecessary tests ordered in that department or another broader statistic.

Present data in a way that promotes clear action and change. If 50% of your health system's ordering providers are requesting an outdated test, follow this number up with a firm action plan of education. This

data can help spark a system-wide change in how providers think and engage with test ordering and blood volume.

Don't just deliver these data points to health system executives. When building an internal utilization program committee, project leaders should look to peers, medical directors, and even physicians to round out the group. Having a mix of outlooks on the committee will lead to fuller, more informed outcomes down the road.

STEP 2



Set realistic goals and measure the effectiveness of your utilization programs.

Once health system leaders and project managers understand exactly how utilization processes are currently operating in their health system, it's time to develop long-term goals to help set the direction of new utilization programs. This is a multi-pronged step that requires leveraging both public governance programs as well as healthcare CRM tracking solutions.

First, health systems must use a public governance program, such as ChoosingWisely.org, to provide guidance and structure for utilization programs. There are currently five recognized categories for utilization management: high cost and unreimbursed testing, unnecessary blood transfusions, duplicative or repetitive tests, clinical pathway diversions, and obsolete or unproven tests.

Most utilization programs start out only focusing on one or two areas of utilization, and this decision is based largely on the data gathered in step one. Which category would impact your health system's bottom

line the most? Which one is the biggest issue for a particular physician group? Utilization committees can separate out utilization programs into these smaller buckets for faster wins and stronger, more focused solutions.

Next, leveraging a healthcare CRM platform is critical to track, measure, and take action on your new utilization outcomes. Activating a healthcare CRM platform gives your utilization program legitimacy in the eyes of system executives and allows stakeholders to take immediate action for continuous progress and change. Make sure you work with a full service built-for-healthcare CRM vendor with in-house experts who will walk your team through every step of the process. With the right healthcare CRM in place, your team can spend less time worrying about technology specs and more time achieving big-picture results in your health system.

How to measure utilization using a healthcare CRM:

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1 Gather and clean all relevant data from related labs and blood banks to be imported into your healthcare CRM platform.
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2 Review, map, and approve all data for accuracy to ensure a seamless upload process.
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3 Turn on the Utilization Dashboards in your healthcare CRM solution to see real-time updates on orders, exceptions, and reimbursements.
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4 Leverage these new insights to drive physician awareness and build a long-term utilization program in your health system.

STEP 3



Educate ordering physicians and other stakeholders to drive positive change.

Once your utilization program is implemented, sharing the message, educating physicians, and discussing the ‘why’ behind the program can help develop an enterprise-wide infrastructure of safe, patient-focused care. It’s important to communicate programs to all stakeholders, especially with patients. Utilization

programs are all about delivering higher quality care to patients, and they should know how innovative health systems are taking steps to make sure only the right tests are administered or the right amount of blood is transfused.

How to market an enterprise-wide utilization program:

Develop long-term internal education programs.

Ask those with the most lab test experience, like lab techs or pathologists, for feedback or suggestions on your utilization program.

Release new data and results on a quarterly basis so physicians and executives know exactly how utilization impacts the bottom line of your hospital.

Stand firm on new processes and change management procedures that have come out of the program, like removing unnecessary tests.

Initiate both internal and external marketing campaigns.

Create internal webinars, videos, and seminars to explain the ‘why’ behind your utilization program, the goals, and the perks of complying with program guidelines.

Promote high-quality, patient-focused outcomes in your community to spread the word to patients and other stakeholders.

Share the long-term byproducts of utilization programs with all stakeholders, including lower care costs and better patient care.

Establish an organization-wide infrastructure for change.

Ensure all departments across your organization are aware of the utilization program initiatives.

Schedule casual peer-to-peer learning opportunities to create long-term, interdepartmental collaboration.

Expand your utilization committee by recruiting team leads and other interested parties to build a more efficient, leaner organization.



Don't forget:

- Over 94% of a patient’s medical record is influenced by laboratory data, and utilization decisions are no different. Analyzing laboratory data is the first step in determining whether or not your utilization program is actually working. Your healthcare CRM platform should be able to gather and analyze all lab data, clinical data, and blood transfusion data for a complete picture of utilization management.

Conclusion

1



Recognize the current state of test and blood utilization in your health system.

2



Set realistic goals and measure the effectiveness of your utilization programs.

3



Educate ordering physicians and other stakeholders to drive positive change.

For health systems, moving away from inefficient practices towards a cost-effective utilization strategy can require time, resources, and the right solutions. With a focused test and blood utilization program in place, health system leaders can start driving high-value care for patients while increasing internal efficiencies and lowering costs. Patients have access to safer, evidence-based care without having to suffer

through unnecessary re-draws or costly transfusions. With these expensive, careless procedures effectively eliminated, health systems can recover billions of wasted dollars that can be better spent on value-based initiatives. See how your healthcare organization can get started building your very own test and blood utilization program with hc1.

Real World Example: McLaren Health Care

About



52,500 contracted providers



17 facilities



102, 877 discharges



573,573 days of inpatient care

Value

→ Increase Internal Efficiencies

Reduce wasteful high-cost, and inappropriate testing

→ Eliminate Low-Value Care

Terminate expensive processes like unnecessary blood transfusions

→ Create organization-wide infrastructure of change

Communicate and share program goals

How



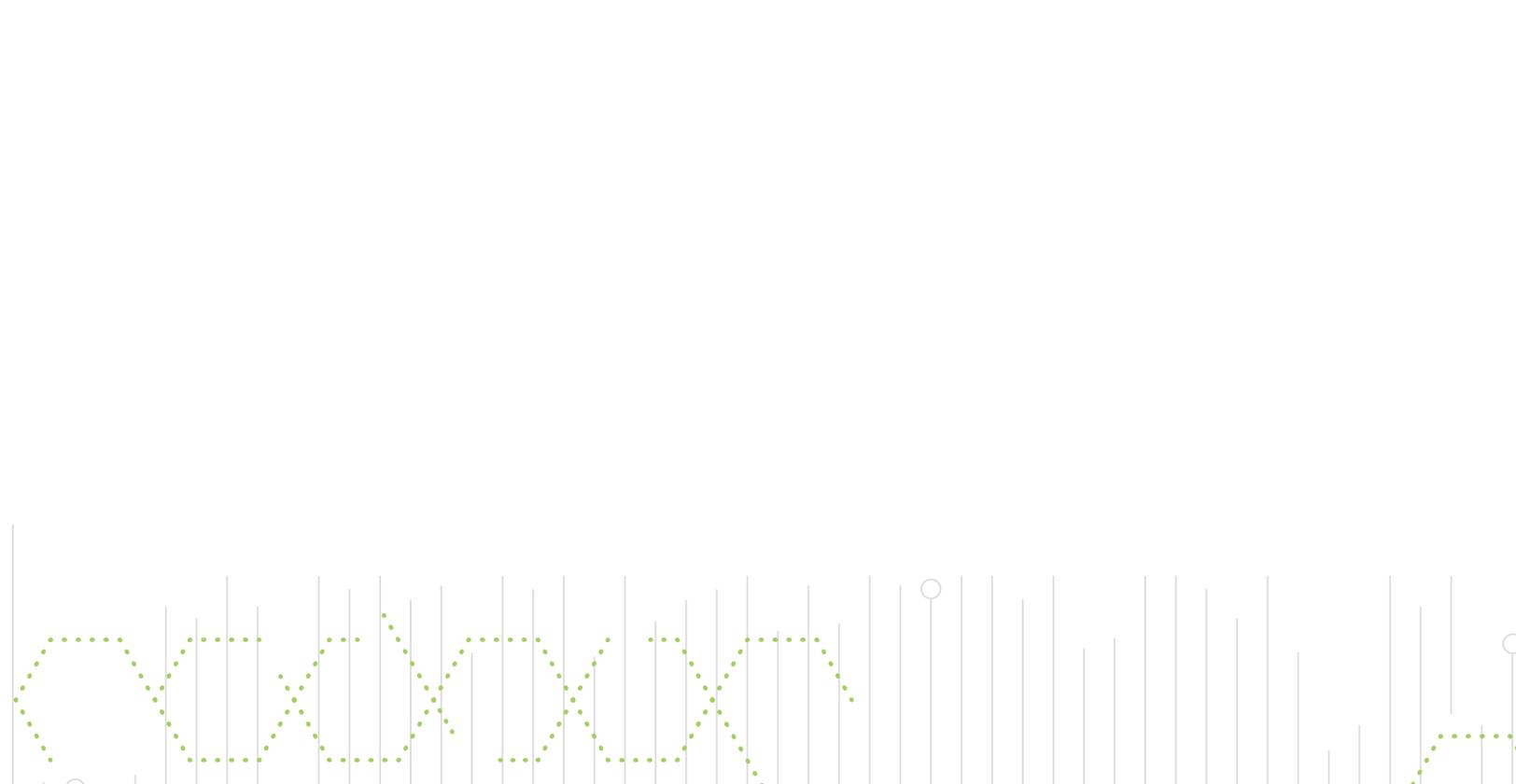
Test Utilization



Blood Utilization



Governance Committee



About hc1

The award-winning hc1 healthcare CRM platform includes live analytics, market intelligence, and collaboration functionality alongside best-in-class healthcare-specific CRM, making us the #1 choice for innovative healthcare leaders around the globe. We're on a mission to unlock answers to healthcare's biggest challenges, like growing profitably, operating cohesively, and delivering high value care. By tapping into the vast amount of clinical and business data housed in our HIPAA-compliant platform, hc1 also offers actionable insight that fosters better public health. The company has received accolades from Gartner Research, KLAS, and has been named "Best Healthcare CRM" by Frost & Sullivan.

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6100 Technology Center Drive | Indianapolis, IN 46278 | 317.219.4722

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