

BRYANLGH MEDICAL CENTER STREAMLINES AND ACCELERATES SCHEDULING

CASE STUDY

BryanLGH Medical Center
Lincoln, Nebraska

BryanLGH Medical Center, Lincoln, Nebraska, is one of the state's largest medical facilities. It is a not-for-profit, locally owned healthcare organization that includes two acute care facilities with a combined 600 beds, a cardiac-care facility, Level II trauma center, outpatient clinics, and a statewide network providing sophisticated mobile diagnostic treatment and services.

Challenge:

Two hospitals with disparate scheduling processes merged in 1997 to become BryanLGH Medical Center – Bryan Memorial Hospital and Lincoln General Hospital. At the time of the merger, Bryan Memorial Hospital used an enterprise-wide scheduling process, while Lincoln General had a quasi-centralized process through which physician offices called Scheduling. Scheduling would then place a conference call to the office or department needing to schedule the event. The processes at both hospitals required scheduling staff to review flip-cards containing required questions for every procedure. Both processes were inefficient and vulnerable to error.

It was clear that the two scheduling processes needed to be reconciled or replaced. This would improve efficiency, reduce errors, and ensure the front-end healthcare interaction experiences of both patients and physicians would be positive at the new BryanLGH Medical Center.

Solution:

Leadership needed to do three things: decide on a scheduling process model, identify software that supported that process, and implement it using staff from two hospitals who did not know one another. The Special Projects Director of the BryanLGH East (formerly Bryan Memorial Hospital) Scheduling Center and his staff reviewed the existing processes.

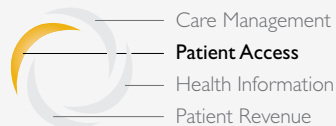
They determined:

- Flip-cards had to go. Their inefficiency contributed to a slow two-minute “time to answer” incoming telephone calls. The mandatory scheduling questions must be automated.

“The ‘time to answer’ incoming calls fell from two minutes to 15 seconds or less, while expenses were reduced by \$191,000.”

David Reese
Vice President of Facilities
and Support Services

QuadraMed Care-Based Revenue Cycle Solutions



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- The requirement that Scheduling call departments for approval before scheduling an event needed to be eliminated. Instead, Scheduling must be able to independently determine if a time slot is open and if so, schedule it. This increased efficiency would also provide more convenience to patients and thereby, greater satisfaction.
- In FY 2002, the scheduling staff numbered 20.6 FTEs due to the use of manual processes. Moving to an enterprise-wide, automated system would reduce staffing requirements.

The Special Projects Director recommended implementation of an enterprise scheduling system and Administration agreed. Together, they chose QuadraMed and went live in 2003.

Using QuadraMed enterprise scheduling software, the BryanLGH Scheduling Center now schedules even the most complex procedures in only a few quick steps. Its flip-cards were replaced with automated questionnaires containing all the questions that need to be asked for any test or procedure. Based upon the name of the test or procedure, the questionnaires appear on schedulers' screens automatically, which further increases staff efficiency and patient satisfaction.

Using QuadraMed, BryanLGH Medical Center replaced two scheduling systems with one that improved efficiency across the enterprise, thereby increasing both patient and physician satisfaction while reducing costs.



Results:

Using QuadraMed, BryanLGH Medical Center replaced two scheduling systems with one that improved efficiency across the enterprise, thereby increasing both patient and physician satisfaction, while reducing costs.

BryanLGH met its goal of eliminating the need to call departments prior to scheduling. QuadraMed scans for the first available appointment across all facilities. The Scheduling Center schedules for all Radiology, whether at BryanLGH East, BryanLGH West, Pine Lake Medical Center or the Mammography Center. It schedules Lab, cardiac cath, interventional radiology, and all ancillary departments. Center staff also uses QuadraMed's integrated rehabilitation scheduler to coordinate complex rehab series appointments and schedule physical therapy at both main campuses.

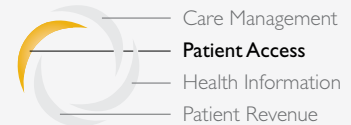
The "time to answer" incoming calls fell from two minutes to 15 seconds or less. This increased the call capacity in the first three-month period by 2,000, and reduced call abandonment to below 20 per day.

QuadraMed also enabled BryanLGH to cut scheduling FTEs from 20.6 in 2002 to 14.8 by 2007. The Scheduling Center reduced total expenses every year since implementation: In 2003, total expenses were \$976,000; in 2006, that annual figure fell to \$785,000.

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QuadraMed Care-Based Revenue Cycle Solutions



QuadraMed Care-Based Revenue Cycle Solutions

Transforming Quality Care into Cash.



QuadraMed Care-Based Revenue Cycle™ solutions optimize the healthcare process by linking clinical and documentation elements with the revenue cycle. These solutions provide an end-to-end framework to support positive patient identification, patient access, care management, health information management and revenue cycle management helping clients achieve quality care and positive financial outcomes.

QuadraMed Care-Based Revenue Cycle solutions improve the entire patient experience and enable healthcare organizations to leverage their quality care to achieve measurable improvements in clinical and financial success.