Providence Hospital is a 349-bed acute care facility in Mobile, Alabama, with over 400,000 uniquely identified patients. It serves approximately 15,000 inpatients and 150,000 outpatients annually. Providence is part of Ascension Health, the nation’s largest Catholic and largest non-profit health system.

**Challenge:**
Ascension Health established a Clinical Excellence goal stating that its system facilities will have no preventable injuries or deaths by July 2008.

Providence Hospital was already poised to implement numerous solutions that would link to its HIS to greatly enhance patient safety. But management realized that as exciting as these paperless changes would be, the benefits would be undercut if MPI data integrity was not up to par.

And the data were not up to par: the duplicate record creation rate was 14 percent. Moreover, the hospital had no system capable of supporting MPI integrity maintenance. Instead, its process required clerical staff to correct duplicates manually, which consumed an average 15 minutes per case, or approximately 7,245 hours per year if all could be detected and resolved.

Errors in the MPI database threatened patient safety. They reduced physician satisfaction by forcing them to spend time gathering relevant patient information from multiple records, delayed registration (decreasing patient satisfaction), negatively impacted Accounts Receivable by causing billing delays, increased A/R, and contributed to even more serious errors called overlays where two different patients’ records become electronically and physically combined, and did not support CDR data links.

**Case Study**
Providence Hospital has cut its duplicate rate in half and maintained an average duplicate creation rate of less than two percent for more than three years.
Improving patient safety and operational effectiveness required two actions. First, the hospital’s existing duplicate records needed to be merged. Second, Providence needed a cost-effective system to prevent creation of new duplicate records going forward if the 2008 Clinical Excellence goal could be achieved.

**Solution:**
Providence Hospital established an Implementation Team from HIM Management, the IS Analyst responsible for MPI, Admissions Management, and ancillary departments that registered patients. Note that almost 60 ancillary departments serve as registration portals.

The Implementation Team reviewed available software and provided demonstrations to end-users. It was important that the systems be user friendly, intuitive, and support staff rather than impose another burden on them. At the same time, the Team had the software tested to determine whether it really would do what Providence needed done. Both end-users and technical testers selected QuadraMed Smart Identity Management Solutions™ and related MPI Cleanup Services.

QuadraMed’s MPI Cleanup Services deployed credentialed HIM professionals to cleanse the approximately 28,000 outstanding identity errors identified by QuadraMed’s SmartScan® Data Assessment. A customized merge script was created by QuadraMed and after the Providence HIM MPI expert validated the automerge script, the duplicates were resolved using QuadraMed SmartMerge® and SmartManager Error Management software.

Maintaining a clean MPI database long-term was critical. Therefore, Providence established new standardized policies and procedures and implemented QuadraMed SmartID®, which generates audit reports that track activity by registrar and department.
The hospital ensured its long-term Identity Management success by making full use of MPIspy® software, which makes staff immediately aware of identity errors in real time, and which generates Audit Reports that track activity by registrar and department.

**Results:**

The QuadraMed MPI Cleanup team identified and corrected approximately 25,000 duplicate records in the Providence MPI database. The clean up was successfully performed ahead of schedule in just 90 days and corrected, under budget, more duplicates than projected.

Subsequently, the level of detail provided by MPIspy — the exact nature of the error made, by whom and when it was made — enabled Providence to routinely send reports to managers for effective research, follow-up and education.

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After implementing QuadraMed Smart Identity Management Solutions, the hospital cut its duplicate rate in half and has maintained an average duplicate creation rate of less than two percent for more than three years. When a rare duplicate cannot be automatically corrected, the software’s audit trail issues alerts that reduce the manual correction process from 15 to only five minutes.
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.