



**News for the  
MEDITECH  
Community**

JUNE 2010

**Thoughts from our President**

I had the privilege of attending MEDITECH's CIO Forum in May. While the program was excellent and there were a number of outstanding presentations, I was most impressed with the keynote speaker, [John Nance](#). The talk, both impressive and inspirational, simply put, was one of the best I have heard in years at any event or conference.

John is one of the founding members of the National Patient Safety Foundation, he is a noted speaker, a pilot, licensed attorney, author of "*Why Hospitals Should Fly: The Ultimate Flight Plan to Patient Safety and Quality Care*" (Second River Healthcare Press 2008) and aviation correspondent for both ABC World News and Good Morning America. He has led a safety initiative known in aviation as CRM or crew resource management that he correlates to human systems in medical practice.

I strongly recommend that each of you take the time to view the video of John Nance's presentation now available through the MEDITECH website: <http://www.meditech.com/mix/pages/2010cioforum/pages/videokeynote.htm>

I would further encourage you to consider playing this at upcoming IS Steering Committee meetings, Physician Advisor meetings, Clinical Project team meetings and related efforts. We do not always take the time to consider alternative views and approaches but I believe this will be worth your time. Let me know what you think!

[John Haffty](#), President  
[Navin, Haffty & Associates](#)

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## **Observations: MEDITECH CIO Forum**

In addition to attending the MEDITECH CIO Forum, Navin, Haffty & Associates was pleased to present at one of the [Education Summits](#). The presentation titled, "*Project Management: The Key to a Successful Migration/Implementation*" shared lessons learned as well as guidance in approaching and organizing 6.0 migration projects.

While MEDITECH's June [on-line magazine](#) and [CIO portal](#) have a more complete review as well as access to the various presentations, we thought we'd share some of the key information learned as well as provide some general observations:

- 6.0 is in demand as MEDITECH shared that 15 sites are now live, more than 100 hospitals have licensed 6.0 and two Client/Server sites are in the process of migrating.
- 6.1 will encompass the new version of the Revenue Cycle suite of applications (BAR, ADM, ABS, CWS, ARM), Surgical Services (ORM), and Quality Management. Although an early adopter is presently undertaking this in Canada, it is our understanding that the first USA hospital, which will represent a new client, will start in early 2011 and that the first migration won't begin until early 2012. Given the complexity of Revenue Cycle management, we appreciate that MEDITECH is proceeding with reasonable prudence.
- As part of the 6.1 enhancements, Surgical Services will have a Surgeon desktop and dashboard feature and Quality Management will add both active and predictive surveillance capabilities.
- As part of the 6.1 version, Long Term Care and Behavioral Health are being rewritten to become a part of the MEDITECH HCIS.
- MEDITECH is currently rewriting its patient portal and they expect it to get to an early adopter in the 6.0 version sometime late this summer or early fall. They will combine their patient portal with the LSS patient portal and using MEDITECH's interoperability suite they plan to be able to accept external data from the CCD format.
- Separate from the patient portal, MEDITECH will work to support Personal Health Records (PHR) using Google Health as a partner.
- As MEDITECH prepares to support the changing [5010 and ICD-10 requirements](#), we were pleased to hear that these software changes would be included as part of the standard maintenance agreement. While historically this has been typical of MEDITECH, it has not been the case for all other software vendors. These significant changes, at no charge, should not be taken for granted as we expect to hear of other vendors imposing fees for these changes.
- As part of the CCD for interoperability, MEDITECH presented how they

are positioned to support industry standard nomenclature, which is part of the ARRA requirements.

- LOINC for Lab has been in place for years
- CVX for immunizations
- RX Norm for medications will be mapped by the formulary service vendors and will be mapped to RXQE code to NDC numbers as part of their formulary load/updates
- Problem lists using SNOMED and ICD-9 and also ICD-10 when effective
- Formulary Service Vendors are determining how to link NDCs to allergy codes and MEDITECH is in close and active communications as this is developed
- LSS gave a most encouraging presentation.
  - e-Prescribing integrated with MPM is live at 28 sites and in process at 25 other sites
  - All MPM data will become available as part of MEDITECH's Data Repository
  - Patient Portal is available for their Magic sites and is also available on mobile devices
  - They are prototyping physician tools on the iPhone
  - The first LSS 6.0 site is live and the first Magic to 6.0 migration site is expected to go live in October
  - They have 14 migrations in process with 6 additional new clients implementing 6.0
  - Most impressive, they described their "Usability Lab" to improve efficiency of the end user experience along with a new prototyping process. In terms of all the new features and changes that LSS is making, this was most encouraging as it demonstrates a fresh perspective to the software development approach that goes beyond adding features and functions.
- DrFirst is live directly with MEDITECH on the acute care side at its first Magic site and have 5 Magic implementations in process and 13 additional implementations scheduled for later this year. They are implementing 2 C/S sites per month currently for 2010.
- MEDITECH is progressing with medical device connectivity.
  - Smart Infusion pumps integration is currently being mapped with a target of Q4 2011 for the first site to go live
  - They are currently field testing mobile vital sign devices (C/S version) with a target for completion by the end of 2010 (will be part of the 5.6 SR5 version)
  - Additional work focused on integration with smart beds, height/weight devices and fetal monitor interfaces
- MEDITECH announced further collaboration with Forward Advantage now offering a suite of Magic to 6.0 interface services as well as other

6.0 migration products and services. Go to [www.forwardadvantage.com](http://www.forwardadvantage.com) for more information.

As always, much of the value of these conferences comes from networking and interactions with peers as well as MEDITECH staff. We believe this continues to be the best opportunity for CIOs and IS Directors to meet their peers.

### **MEDITECH and Meaningful Use**

MEDITECH continues to provide valuable information for meeting "Meaningful Use" criteria as well as materials for use in educating your organization.

Below is a link to a PDF printable table labeled, "Beyond Meaningful Use: Strategic Guidelines to Quality Initiatives."

We hope you find this useful:

[http://www.meditech.com/interoperability/flyers/matrixNew\\_final.pdf](http://www.meditech.com/interoperability/flyers/matrixNew_final.pdf)

### **Howard Messing Interview**

Many of you will find the podcasts on HealthSystemCIO.com with Howard Messing, President of MEDITECH, of interest. Go to:

- [Part 1 of the interview](#) focused on MEDITECH's growth strategy, and gave Messing a forum to express his opinions about Meaningful Use.
- [Part 2 of the interview](#) featured a deeper discussion of Meaningful Use, expanded to include patient safety, certification, the increased role of government, and MEDITECH's commitment to all of its software releases and customers.
- [Part 3 of the interview](#) concluded with an examination of MEDITECH's internal culture, and Howard Messing's strategies for carrying it forward across all levels of the company.

### **Quick Impressions: MUSE International Conference**

It has been a busy month for conferences and workshops. In addition to the MEDITECH CIO Forum, I also attended the [MUSE International Conference](#) in

Dallas the first weekend in June. Here are a few impressions and observations:

- The 6.0 Summit was excellent and was well attended.
- The CIO Summit was outstanding in terms of the program and presentations but there were only a limited number of CIOs and IS Directors present and about half the audience appeared to be vendors.
- We really like the impromptu 5.6 SR4 upgrade group that came together with the responsiveness of the MUSE organization.
- We also appreciated the level of engagement, constant networking and energy of the attendees which carried over into the various social events.
- It appeared that the enthusiasm and focus of the peer group sessions are not what they used to be.
- Finally, vendors were thanked for their support and sponsorships to the point of excess. There were many times however that we did not hear the same level of recognition to the attendees.

My thanks to all who attended our reception and stopped by our booth to say hello. Also, my thanks to the MUSE Board and all the volunteers who put in the tremendous effort to make these conferences happen.

### **KLAS Report on Consulting Companies**

[KLAS](#) has issued a new report, "*Shifting Demand for Consultants, Who's Hot and Who's Not and Why*," based on interviews with 118 healthcare providers. In their May 18<sup>th</sup> press release, Navin, Haffty & Associates (NHA) received an interesting mention with regard to demand for MEDITECH centric services:

*"Another factor that is driving demand for experienced consultants is the migration of MEDITECH clients to the company's version 6.0 platform. As MEDITECH tries to move more than 1,500 U.S. hospitals to v.6 and advanced clinical features like computerized physician order entry (CPOE), firms like Firm 1 (Name deleted), Firm 2 (Name deleted) and especially NHA, are seeing much more demand for their services than three years ago, thanks to their experience with MEDITECH."*

This is the first year we have agreed to participate in their survey in response to the request of several of our clients. In addition to being

recognized in this survey, we are also listed in their mid-year report in two categories. We appreciate all of our clients that have agreed to serve as references for our work as well as their willingness to share their thoughts and time with the folks from KLAS.

### **E-Prescribing**

If you are considering e-prescribing or have begun such a process, there is an excellent article on this topic in the spring issue of the [Journal of Health Information Management](#), the quarterly journal from [HIMSS](#). (You'll need a HIMSS membership number to get to this.) The article is by Patti Brooks and Chris Sonnenschein of Avera Health, Sioux Falls, SD, a large multi-facility health system on MEDITECH C/S.

In this article, they do an outstanding job of describing the evolution, benefits, and challenges of e-prescribing along with providing their experience based on using MEDITECH and LSS with DrFirst.

Here is the link to this article:

<http://www.jhimdigital.org/jhim/spring2010#pg55>

### **Navin, Haffty is Hiring!**

We continue to grow! If you have interest in consulting and have solid MEDITECH experience with implementing one of their applications, please contact us. We have an outstanding mentoring program for new consultants and have the best reputation in the MEDITECH community for training and development of our staff.

We are also interested in experienced consultants from other companies. As the largest company that works exclusively with MEDITECH, you would be supported as you continue to build your skills. Further, our management approach has demonstrated a respect for our consultants and created a collegial atmosphere that encourages information sharing and support.

We believe there are significant advantages to being part of Navin, Haffty. We now offer several employment options including an outstanding benefits package as well as selected options for independent consultants. As part of the largest consulting company focused exclusively on serving the MEDITECH community, we enjoy an excellent working relationship with MEDITECH and offer a collaborative work setting. Our approach has led to

our record for consultant retention which is the best in the industry. If you are interested please contact Shelly Noyes at [snoyes@navinhaffty.com](mailto:snoyes@navinhaffty.com) or call her at 800-561-6005.

Please note that at this time, we can only consider those able to travel up to 80% of the time. (Also employees from MEDITECH and our clients will not be considered.)

### **Job Posts**

If you are interested in exploring new positions, go to our job posting section of our website. This is a free service of Navin, Haffty and Associates to the MEDITECH community. Currently, there are many postings from MEDITECH hospitals. If you or a colleague might be interested, check out what's open at the [Navin, Haffty website](#).

If you would like to include your hospital listing on the Navin, Haffty website, please email Kelly Tracy at [ktracy@navinhaffty.com](mailto:ktracy@navinhaffty.com) (Please note that as this is a courtesy to the MEDITECH community, we will not accept postings from recruiting companies).