

## Healthcare paperless transition: A \$47 Billion administrative burden

### Opportunity

Focusing on the physical format without consideration of replacing and improving care environment is a \$47 Billion setback

Estimation for improvement on efficiency improvement is 30%<sup>1</sup> or \$230 Billion annual, prior to paperless transition. The paperless transition places 25% additional administration burden<sup>2,3</sup> or \$47 Billion.

Administrative burden on care providers means less patient care time, more risks

- No replacement tool or environment is mandated for care environment, especially intensive care.
- The situation translates to more time searching for patient data, delayed medical diagnosis, less patient care time which translates to less patient / revenue.

### Solutions

Patient dashboard with real-time information, accessible anywhere, anytime from any sources, consolidating multiple sources

Dynamic Patient Dashboard<sup>®</sup> (DPD) replaces paper nurse flow sheet, with time-based correlation of medical data, eases medical diagnosis, creates real-time interoperability platform for concurrent access to diverse EMR sources.

Patient care quality improvements

- By aggregating and organizing all relevant patient data in real time, Zoeticx DPD mitigates miscommunications on patient medical conditions, in real-time, regardless of the back end data sources (EMRs).

### Drivers for Change

- EMR meaningful use
- Physician acquisition
- Universal dashboard for diverse EMR solutions

Paperless transition creates a gap between care environment and core IT technology. Administrative burden on physicians is higher due to multiple healthcare institutes engagements with diverse EMR solutions.

Complementary solutions on top of healthcare legacy deployment

- Mobilize care providers staff with client applications on iPad and iPhone.
- Extend existing legacy deployment with no upfront IT through cloud deployment.
- Reduce training cost with intuitive user interface.

*'The percentage of clinicians who would not recommend their EHR to their colleagues increases from 24 percent in 2012 to 39 percent in 2012'*

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- 25% additional administrative burden on care providers translates to \$47 Billion in hospital environment.

### Root causes

- Time spent on navigating EMR user interfaces to view, filter, and manually correlate disparate patient medical data means less time for patient care, more potential medical errors.
- Some care providers practice at multiple healthcare institutes, and likely work with multiple EMRs. With multiple user interfaces, care providers are less effective on their primary role – providing patient care.
- Just like email on mobile devices, physicians expect to get notified on patient condition changes at the right time, instead of continuously polling for the information. The existing model simply does not scale.

### Solutions

- Zoeticx DPD combines mobile, cloud and SOA (Service Oriented Architecture) to provide full access (including data entry) anywhere, anytime.

### Patient care continuum

- 'The best medical hand-off process is to have no medical hand-off process'. Reminder, sticky notes, manual process is replaced with an automated care environment, supported by full medical information access, up-to-date on patient medical conditions.
- Real-time access of patient care history from diverse medical data sources reduces potential medical errors due to lack of medical information flow.
- Real-time collaboration among care providers increases patient care efficiency and reduces potential miscommunication.

### Drivers for change

- Leverage tablet intuitive navigation and consumer acceptance for seamless transition from paper to paperless patient medical records.
- Empower care providers by bringing patient medical information at their 'fingertip' with the ability to share, collaborate among them.



CareIntelligence product tour:  
<http://www.youtube.com/watch?v=tLGsaKvrtOA>  
Preventable medical error case study:  
<http://www.youtube.com/watch?v=5dv-50dXuf0>

(1) IOM Report: Estimated \$750 B wasted annually in health care system – Kaiser Health News (Sept 2012)  
(2) Drivers of Health IT in 2013: Rising costs, BYOD, Productivity, Compliance, and Consumer Engagement – Dennis Schmuland / Chief Health Strategy Officer  
(3) Study: EMRs' effect on docs' productivity depends on needs, workflow – UC Davis Research, CA