VISITING NURSE & HOSPICE FOR VT & NH - DARTMOUTH-HITCHCOCK HEALTH SYSTEM INTEGRATION

Summary

Dartmouth Hitchcock Health "D-HH" is building an integrated delivery system that provides high quality care, timely access to services, and an optimal patient experience. To successfully function as a truly integrated delivery system, D-HH requires a cutting edge digital infrastructure. As an affiliated member of the system, the Visiting Nurse and Hospice for VT & NH "VNH", needs to upgrade the current digital systems.

The proposed project will replace disparate, aged and disconnected technologies. It will connect VNH to a unified electronic medical record across the system, with business support functions for all service lines and provide access to telehealth options. Full clinical integration will advance the health of our communities by supporting numerous population health interventions, reducing the risks associated with transitions in care and improving communication for all involved. The goal is to improve system wide outcomes and reduce costs by improving care coordination, reducing digital barriers to sharing patient information, and by streamlining system redundancies, ultimately reducing leakage of patients outside our system or those lost to follow up. We strongly believe implementing a shared system now will allow VNH to actively develop new care options in the home and position us for future technology evolution by leveraging the value of the entire system.

The total investment is estimated to be \$5.5 million, over two fiscal periods; FY 2022 and 2023. This investment will be a partnership between VNH and D-HH. VNH will contribute approximately \$1.4 million (capital & operating costs). D-HH is committed to investing \$4.1 million.

Project Scope

This project, led by D-HH Information Systems, envisions the VNH replacing numerous, disconnected systems with an integrated suite of D-HH applications for all of its core information systems, including:

- ✓ An integrated healthcare information systems suite which includes a single electronic medical record and essential patient scheduling, registration and billing solutions.
- ✓ Core business systems required to run the business enterprise (finance, budgeting, human resources, supply chain, etc.);
- ✓ Crucial analytics and business intelligence tools; and
- ✓ The supporting technology infrastructure (computers, networks, servers).

VNH's respective business platforms (Net Smart, Telephony, and UltiPro) will be replaced with a comprehensive unified set of Epic products as well as business enterprise specific applications (ERP). Simultaneously, we have begun evaluating and adapting workflows; installing a common hardware infrastructure; mapping core business applications, and migrating our current mailboxes (O365 to Exchange). Lastly, upon completion of the project and with deployment of new integrated tools, data will feed into a unified data warehouse in order to utilize the health system's analytic platform and tools.

Benefits

Population Health

Unified digital systems allow the enterprise to manage populations of patients across the spectrum of care and community by linking resources and creating large shared data sets.

Value-Based Care

➤ Reducing System-wide Costs — There are three main benefits of affiliates, like VNH, migrating to D-HH systems: a) the value implicit in a single source of clinical data, b) enhanced ability to manage the integrated business, and c) migration towards standardization and best practice in our care and business processes. There are no additional healthcare costs for the consumer as a result of this system integration.

New Payment Models

Establishing a unified robust technology platform that integrates clinical, administrative and financial applications advances VNH's capabilities and preparedness for newly emerging value-based payment models that require harmonizing previously disparate data sets related to quality, clinical outcomes, claims, delivery cost, patient experience, physician and payer attribution, etc.

Key Dependencies for Project Success

In order for this Project to be successful, planning and execution efforts need to synchronize and acknowledge certain key dependencies across various domains: *Technology* - equipment, *Resources* - the recruitment and training of staff, both employees and contractors, and *Processes* — adaptation of existing D-HH processes and workflows to streamline implementation and increase standardization.

Budget

As reflected in the following table, the proposed project budget covers an 18-month period, which cuts across two fiscal periods 2022 and 2023, starting in February 2021. In total, the budget for the project is approximately \$5.5 million of capital costs covering labor, non-labor, and a 10% contingency; along with ongoing labor and non-labor annual costs of \$750 thousand to be further validated during the fiscal 2022 budget process. (See table below)

VNH - ERP & Clinical, Anciallary, Access & Revenue (CAAR) Projects				
Labor Costs				
			Sum of Project Labor	
Row Labels	Sum of FY22 Costs	Sum of FY23 Costs	<u>Costs</u>	
■ Incremental	\$3,215,104.19	\$354,655.33	\$4,026,219.52	
Capital	\$1,648,599.30	\$354,655.33	\$2,003,254.64	
Expense	\$1,566,504.88	\$0.00	\$2,022,964.88	
■ Non-Incremental	\$880,705.69	\$79,006.65	\$1,083,079.15	
Capital	\$880,705.69	\$79,006.65	\$1,083,079.15	
Grand Total	\$4,095,809.88	\$433,661.98	\$5,109,298.66	
	Non-Lab	or Costs		
Row Labels	Sum of FY22 Costs	Sum of FY23 Costs	Sum of Total Project	
■ Incremental	\$340,000.00	\$17,641.00	\$357,641.00	
Capital	\$340,000.00 \$0		\$340,000.00	
Expense	\$0.00 \$17,641.0		\$17,641.00	
Grand Total	\$340,000.00	\$17,641.00	\$357,641.00	
	<u>FY22</u>	<u>FY23</u>	<u>Total Project</u>	
Incremental Cost:	\$ 3,555,104.19	\$ 372,296.33	\$ 4,383,860.52	
Non-Incremental Cost:	\$ 880,705.69	\$ 79,006.65	\$ 1,083,079.15	
Total Cost:	\$ 4,435,809.88	\$ 451,302.98	\$ 5,466,939.66	
D-H Portion (75%)	\$ 3,326,857.41	\$ 338,477.23	\$ 4,100,204.75	
VNH Portion (25%)	\$ 1,108,952.47	\$ 112,825.74	\$ 1,366,734.92	

Timeline

The following table represents a high level timeline for the project with a target Go-Live date of April 2022.

Phase/Event	Initiation Date	Duration
Project Kick-off	1/21	12/21
Project Definition	1/21	3/21
Discovery & Scope	3/21	4/21
Validation	9/21	12/31
System Build	4/21	4/21
Testing & Training	1/22	3/22
Go-Live	4/22	On-Going
Post Go-Live Support	5/22	On-Going