

What to Do (and Not Do) When Changing HIM Vendors

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By Angela Rose, MHA, RHIA, CHPS, FAHIMA

The outsourcing of health information management (HIM) functions is not a new concept in the healthcare industry. Coding, clinical documentation improvement (CDI), transcription, electronic health record (EHR) systems, and release of information (ROI) are a few of the functions for which HIM leaders seek support from service vendors in today's evolving healthcare environment. Many factors—including laws, regulatory requirements, best practices, resources, and finances—contribute to the overall success of an implementation project or change in service vendor. To promote consistency and trust within a strong partnership, communication and transparency are critical throughout the process.

Choosing the right vendor can be a challenging and daunting task, especially if your current service has been in place for a long time. Whether the service being considered for outsourcing options is in-house or with another vendor, the key to a successful transition is in the planning. Defined tasks and milestones are required to ensure a normal state of operations is achieved as efficiently and effectively as possible, keeping the end goal in mind—optimal outcomes for the organization, the vendor, and most importantly, the customer.

This virtual roundtable takes a close look at the real-life experiences of three HIM experts during their service vendor transitions. Topics include the challenges, lessons learned, and practical strategies that help ensure quality service and a lasting collaborative partnership. Facilitated by Angela Rose, MHA, RHIA, CHPS, FAHIMA, vice president of implementation services at MRO, the discussion focuses on each expert's type of vendor transition: transcription, EHR, and ROI.



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Cindy M. Phelps, RHIA, senior director, TSG business relationship management, Carilion Clinic, a not-for-profit healthcare organization based in Roanoke, VA



Sherine Koshy, MHA, RHIA, CCS, corporate director HIM, Penn Medicine, a leading academic medical center based in Philadelphia, PA



Kathleen J. Edlund, M.M., RHIA, director of HIM, Trinity Health, a national not-for-profit Catholic health system based in Livonia, MI

Handling a Transcription Transition

Rose: Describe the challenges you experienced that prompted your organization to seek a better solution.

Cindy M. Phelps, RHIA, senior director, TSG business relationship management, Carilion Clinic, a not-for-profit healthcare organization based in Roanoke, VA: The previous vendor that managed transcription services was experiencing significant reorganizational changes that negatively impacted our daily operations. Service and quality metrics were not being met consistently. We were also looking to consolidate vendor products and work with one vendor that could accommodate all of our dictation/transcription needs, both medical and imaging. In addition, the ability to meet operational staffing requirements for 24/7 transcription coverage was an increasing challenge.

Rose: Briefly state the most important lessons learned and suggest practical strategies to achieve a successful transition.

Phelps: In addition to changing vendors and platforms with dictation/transcription, we were also moving to managed services. Our focus was on the staff to be sure their needs were met through this transition. We knew the dictation/transcription platform would meet our organizational needs both present and in the future. For a successful transition, we recognized the need for a collaborative partnership with the vendor, IT, HIM, operations, medical staff, and human resources. Ongoing open communication was a critical concern. As a result, five strategies emerged:

- **Conduct benchmark, research, and reference checks.** All three are necessary when transitioning to a new vendor, along with understanding industry trends.
- **Establish key performance indicators.** This is essential to accurately track progress and measure success.
- **Engage multidisciplinary teams.** Include the vendor and your organization's operations, IT, physicians, and human resources to define and develop a step-by-step transitional process.
- **Conduct a pilot test.** Engage physicians to fully test the system, identify potential issues, and see the final product. This was a successful and vital part of the process of transitioning both vendors and platforms.
- **Communicate and collaborate.** Provide ways to communicate with all stakeholders and staff every step of the way. Conduct ongoing focus meetings to prepare, transition, and handle post-implementation. And communicate with the outgoing vendor to maintain that relationship throughout the transition.

Rose: *In your experience, what are the components of a strong, collaborative partnership that promotes ongoing optimal outcomes?*

Phelps: Key performance indicators tell the story of success. These are essential, along with documenting client feedback. In addition, we recommend the following components:

- Monthly review meetings to discuss successes, concerns, and issues with the vendor.
- Engagement and availability of the vendor in the daily operational business.
- Vendor sharing latest trends with development and with their other clients.
- Annual onsite business review to highlight current state and share future state with key stakeholders.

Handling an EHR Transition

Rose: *Describe the challenges you experienced that prompted your organization to seek a better solution.*

Sherine Koshy, MHA, RHIA, CCS, corporate director HIM, Penn Medicine, a leading academic medical center based in Philadelphia, PA: Penn Medicine had implemented an EHR on the ambulatory side early on in the late 90s. In March 2017, the enterprise-wide implementation was completed as a necessary step to have all users on one platform. Up until that point we were living in two different worlds—one EHR system for ambulatory and another for inpatient. Because the systems did not talk to each other, each functioned in its own silo. Transitioning to one system enables patient care providers to view the patient's entire medical history in one system, which supports the coordination of patient care across the health system.

Rose: *Briefly state the most important lessons learned and suggest practical strategies to achieve a successful transition.*

Koshy: Setting priorities requires a governance structure involving all key stakeholders—IT, clinical, financial, and operations. We needed a structure that included both a clinical and revenue tower, and a lead under each specific operational area. We realized the importance of bringing the organization together to achieve our mission. To that end, our team recommends four strategies:

- **Create a project charter.** Define the project scope, goals, and objectives. Set expectations and accountability. Develop a timeline with milestones and phases.
- **Build a collaborative team.** Include experts from each operational area. Engage key stakeholders and hold them accountable. Promote ongoing communication and updates, require attendance in person, and have an escalation process to reach agreement when necessary.
- **Provide training and education.** Training is essential to a successful transition. Secure go-live support. Engage vendors whose teams are experienced with the implementation of your specific EHR brand. Our key message was: "No training—no access!"
- **Track key performance indicators (KPIs).** Establish and track KPIs pre- and post-go-live.

Rose: *In your experience, what are the components of a strong, collaborative partnership that promotes ongoing optimal outcomes?*

Koshy: It is important to work with a vendor that serves as an extension of your department and understands how your department operates. And, it is important to invest in the training and resources necessary to meet the needs of your organization. Once you're live, what's next? Optimize. Always challenge, stay on top of the changes, and communicate opportunities for improvement. Having one unified

system has helped us expand our department as we've grown and acquired additional hospitals. We are able to assist with resources and be more nimble.

Handling a Release of Information Transition

Rose: *Describe the challenges you experienced that prompted your organization to seek a better solution.*

Kathleen J. Edlund, M.M., RHIA, director of HIM, Trinity Health, a national not-for-profit Catholic health system based in Livonia, MI: ROI is one of the most challenging HIM functions. In a constantly changing regulatory environment, timely, accurate, and compliant release of medical records is crucial for us and for our patients. A strong partnership and transparency with an ROI service vendor became even more important to ensure the application of best practices aligned with our vision, values, and organizational goals. Our biggest challenge was that the lack of client support consistently failed to meet the standards of the organization.

Rose: *Briefly state the most important lessons learned and offer practical strategies to achieve a successful transition.*

Edlund: To ensure all aspects of ROI are included in the pre-implementation planning assessment, it is critical to know the details of current processes, policies, and procedures. In addition, any recommended changes to the current workflow must be fully understood to enhance the training, education, and overall success of the implementation. Six strategies emerged from our process:

- **Complete pre-implementation assessment documentation.** Do this well in advance of the due date to allow for questions, comments, and potential revisions to the plan.
- **Create a visual diagram model of the process flow.** Indicate all workflow tasks, designated staff, and appropriate handoffs. This is a useful tool for system training and to identify any gaps or barriers to providing the ROI services.
- **Schedule and conduct vendor-specific training.** Design training according to roles and areas of responsibility.
- **Ensure understanding of ancillary departmental (EHR) software systems.** Know how to access the patient record data for future ROI requests. All medical record data for a particular patient must be available to comply with certain ROI requests.
- **Establish and track metrics.** Know the service-level agreements or metrics for pre-implementation. For post-implementation, stay informed regarding metrics including status of requests, turnaround time, ROI volumes, and financial impact. Keep a pulse on the level of customer service to both the requester and client.
- **Preserve a working relationship with the outgoing vendor.** Communicate to ensure the expected level of service continues through the transition period.

Rose: *In your experience, what are the components of a strong, collaborative partnership that promotes ongoing optimal outcomes?*

Edlund: As in all of life, open communication is essential to partnership and achieving optimal outcomes. Routine meetings, whether virtual or in person, enhance collaboration, prompt accountability, and maintain agreed-upon touch points. Second, the ability to establish positive relationships enables those involved to respectfully and honestly agree to changes, or to challenge any procedural details. This kind of collaborative partnership typically leads to overall process improvement.

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