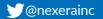## The Process & Technology Matrix

Technology plays a key role in keeping hospital operations streamlined and on track. Organizations that approach technology holistically—integrating their finance, clinical, and materials management information systems—are better equipped to overcome reimbursement challenges and achieve their cost-reduction and revenue enhancement goals.

Utilizing real work and observed experience, Nexera has developed this matrix to provide healthcare organizations with a step-by-step guide for optimizing their existing technology. Our consultants will work with you to assess your current systems, benchmark your facility against your peers, and develop an implementation strategy to realize utilization objectives, normalization, department integration, and organization-wide savings goals.

Technology Capabilities

STAGE 0	STAGE 1	STAGE 2	STAGE 3	STAGE 4	STAGE 5 Best Practice
▪ Partial IMF	▪ Complete IMF, items normalized	▪ IMF maintained	▪ IMF maintained	▪ IMF maintained	▪ IMF maintained
▪ Manual ordering with corresponding, established business rules	▪ Manual ordering	▪ EDI in place	▪ >80% EDI maintained	▪ EDI maintained	▪ EDI maintained
▪ Select contracts in place	▪ 50% of items on contract	▪ >70% of items on contract	▪ >80% of items on contract	▪ Contract items maintained	▪ Contract items maintained
▪ Manual charging	▪ Manual charging	▪ Manual charging	▪ Charging via physician preference cards	▪ Charging via physician preference cards	▪ Charging system maintained
	▪ Paper requisitioning	▪ Electronic requisitioning	▪ Electronic requisitioning >90%	▪ Electronic requisitioning >95%	▪ Electronic requisitioning maintained
	▪ PAR levels in place >50%	▪ PAR levels in place >80%	▪ PAR levels in place >90%	▪ PAR levels for all stock items	▪ PAR levels maintained
		▪ Electronic physician preference cards >50% established in OR scheduling system	▪ Electronic physician preference cards complete	▪ Physician preference cards continuously maintained	▪ Physician preference cards maintained
		▪ OR scheduling system interfaced with MMIS	▪ Dashboards established	▪ Dashboards maintained	▪ Dashboards maintained
			▪ Exception reporting (three-way matching)	▪ Exception reporting	▪ Exception reporting completed daily
			▪ Business rules established for new processes	▪ Perpetual inventory in MMIS	▪ Charge-to-order system successfully implemented
			▪ VAC created	▪ New business rules successfully implemented	▪ Weekly VAC meetings held with established sub-committees
				▪ VAC meets regularly, used for all product requests	

Data and informatics are the new healthcare currency. Let Nexera help you maximize these assets through a technology optimization strategy. **Call us today.**

Where does your organization fall on the matrix?
Check all that apply.

STAGE 0
- ☐ Manual ordering through materials management information system (MMIS) with corresponding, established business rules
- ☐ Select contracts in place
- ☐ One hospital-wide, partially complete Item Master File (IMF) is in place
- ☐ Manual charging is in place

STAGE 1
- ☐ Manual ordering is still used, but at least 50% of items are on contract
- ☐ Hospital-wide IMF is complete and items are all normalized
- ☐ Manual charging is in place
- ☐ Paper requisitioning is used for all product requests
- ☐ Period automatic replenishment (PAR) levels are in place for over 50% of stock items and/or location items

STAGE 3
- ☐ EDI use is expanded to more than 80% of vendors
- ☐ Contracted items in the IMF in place for more than 80% of product requests
- ☐ PAR levels are established for at least 90% of stock/PAR location items
- ☐ 100% of physicians have electronic preference cards
- ☐ Exception reporting is in place via a three-way match
- ☐ Metrics and reporting dashboards are established using functions in MMIS/OR system/IT systems
- ☐ Business rules are established for the new processes
- ☐ A hospital-wide Value Analysis Committee (VAC) has been created with corresponding processes

STAGE 2
- ☐ Electronic data interchange (EDI) is in place for principal and additional vendors/manufactures
- ☐ Over 70% of items are on contract via the use of the contract module in the IMF
- ☐ Manual charging is still in place, but electronic requisitioning is used for at least 50% of product requests
- ☐ PAR levels are in place for over 80% of stock/PAR location items (including OR, IR, Cath lab, ER, and storeroom)
- ☐ Greater than 50% OR physician preference cards have been established in the OR scheduling system
- ☐ OR system is interfaced with the MMIS and IMF items flow from the MMIS to the OR system

STAGE 4
- ☐ Business rules and processes/procedures for EDI maintenance, contract item maintenance, and IMF maintenance have been implemented successfully
- ☐ Charging via physician preference cards remains in place, but more than 95% of item requests are ordered via electronic requisitions
- ☐ PAR levels are in place for all stock/PAR location items
- ☐ All OR physician preference cards are continuously maintained in the electronic system
- ☐ Exception reporting is performed via the three-way match
- ☐ Perpetual inventory is established within the MMIS
- ☐ The hospital-wide VAC conducts meetings and is actively used for all product requests

STAGE 5
- ☐ Business rules and processes are followed and updated for EDI maintenance, contract item maintenance, IMF maintenance, charging system maintenance, electronic requisitioning maintenance, PAR level maintenance, and physician preference card maintenance
- ☐ Exception reporting is completed daily
- ☐ Charge-to-order system is successfully implemented
- ☐ Weekly VAC meetings are held and sub-committees have been established by specialty