

INTRODUCTIONS: DR PANKAJ GUPTA AND TAURUS GLOCAL CONSULTING DR PANKAJ GUPTA

#HealthInnovation Summit Dubai
28th January 2014

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- Partner, Taurus Glocal Consulting
- Board Member HIMSS Asia Pacific India Chapter
- Health Innovator in Residence @ The International Centre for Health Innovation, Richard Ivey School of Business, The University of Western Ontario

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DR PANKAJ GUPTA

Dr. Gupta has over 2 decades of Healthcare industry experience which enabled process improvements, IT cost reduction, organization change management, and business transformation through implementation of Healthcare-IT solutions for Hospitals, Life-sciences and Pharma companies.

Dr Gupta is a qualified Dental Surgeon with an Executive MBA from IIMB. He also has a PG Diploma in Computers and a Special Diploma in Bioinformatics.

Dr Gupta is a NABH and ISO certified consultant. He has applied Healthcare Quality standards for Healthcare process optimization using IT.

Dr Gupta has been on the academic advisory board of IIMR Delhi, a leading healthcare management institute.

Dr Gupta is a member of the ICT subgroup of SIC in Health, part of the National Innovation Council under the Prime Minister's Office, GOI

Dr Gupta is a Board Member of HIMSS India Chapter.

Dr Gupta is Health Innovator in Residence @ The International Centre for Health Innovation, Richard Ivey School of Business, The University of Western Ontario.

As a founder of Taurus Global Consulting Dr Gupta leverages healthcare business knowledge and technology insight to provide business transformation across all healthcare stakeholders.

Has played a vital role in meta data and data standards consulting with Ministry of Health and family welfare, Govt of India.

Clinical transformation of Max Healthcare using IT as a change agent. Handled the complete ITO as the P&L leader from Perotsystems.

As part of Infosys - Healthcare-IT standards consulting for a large HIS company in US.

As part of Infosys - Provided strategy consulting to a large pharmaceutical packaging company to conceptualize and build the first ever online comprehensive chronic care management program.

Developed EHR product for Infosys as part of the Canada eHealth go to market strategy.

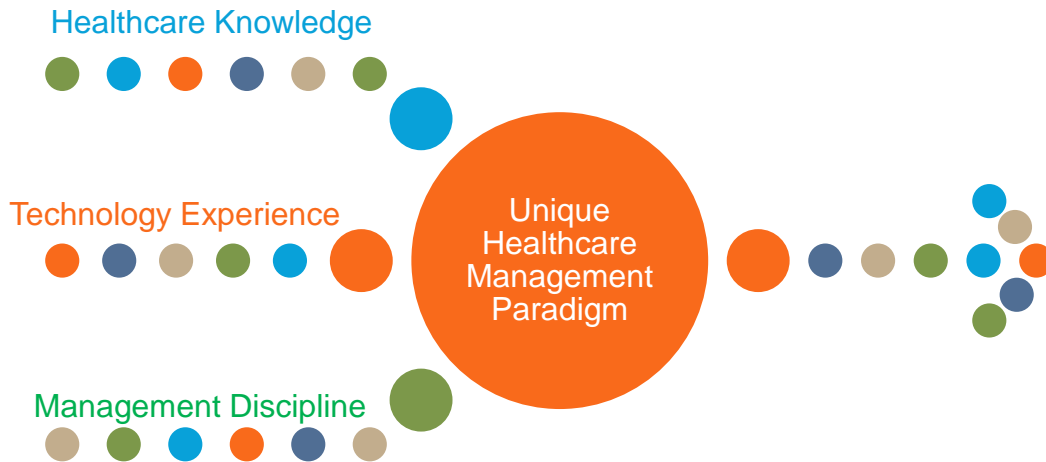
Setting up of captive offshore centre for CERNR, a market leader in Hospital information systems, for R&D, cost arbitrage and market outreach.

At FCG, Conceptualized and implemented business transformation services for large US hospitals e.g. by building 24/7 IT operations support.

As part of Satyam – Setup the PMO and implemented the first FDA validated offshore services centre in India for a UK based Pharma company.

As part of Applied Biosystems Inc., a sister concern of Celera Genomics - Led a project for building an intelligent configurator to support the selection of DNA molecules for the Microarray plates, involved in the Human Genome project.

WHY TAURUS GLOCAL CONSULTING?



Exclusively focused on eHealth and Healthcare management consulting

Founded by doctors with healthcare management and technology experience

Provide a vision and link to the future of the Healthcare industry

Portal between vision and execution

Works as a part of the clinical team to deliver value

BRIDGE BETWEEN VISION AND EXECUTION








Management and technology consulting by combining deep healthcare expertise with paradigm shifts in strategy, operations, technology and performance management.

CLINICAL AND BUSINESS TRANSFORMATION TO ACCELERATE RETURNS

Consulting Services Portfolio	Consulting Services Details
Healthcare IT Portfolio Management	<ul style="list-style-type: none"> -Providing Technology evaluations and deployment strategies -Leading Clinical Transformation using Technology -Boot-Strapping Healthcare Organizational Change Management -CAUSE Methodology -Accelerating Health IT product innovation -Executing Quantitative Program Management Projects -Expertise to support US Meaningful Use Requirements
Healthcare Quality Consulting	<ul style="list-style-type: none"> -Building Next Generation Practices -Healthcare Processes Optimization Methodologies -Deploying Healthcare Service Innovation Strategies -Analyzing Root Causes and Risk Management Approaches -Decision Support for C-Level
Healthcare Facility Planning	<ul style="list-style-type: none"> -Green-field Hospital design including IT, process and people planning and program management
Healthcare Investments Portfolio Consulting	<ul style="list-style-type: none"> -Force Multiplier Framework -Defining Market Entry and Growth Strategies -Rationalizing and Maximizing healthcare investment portfolios.



HEALTHCARE TECHNOLOGY AND HEALTHCARE QUALITY PROJECTS DONE BY TG

PROJECTS*	CUSTOMER
<p>Public Health IT study done with national health systems resource centre [NHSRC], as a background study for ICT sub-group of Health SIC and inputs to the 12th Plan.</p> <p>Consultant for Health Domain Meta Data and Data Standards [MDDS] development project with MOHFW, and NHSRC as project secretariat.</p>	<p>MOHFW, Govt of India</p> 
<p>Outsourced the CMIO office from a group of super specialty and cardiac Hospitals, HQ in Bengaluru [recently awarded as the world's 2nd most innovative healthcare company]. Worked on Clinical process and IT innovations.</p>	<p>Narayana Hrudayalaya Hospitals</p>
<p>Working with Norwest Venture, a large PE/VC to advise on their Healthcare investments in India.</p>	
<p>Working as IT strategy consultants with NationWide, a chain of primary care clinics.</p>	
<p>Implementation partner and systems integrator for VistA EMR implementation at AIIMS Trauma Care centre New Delhi.</p>	 <p>All India Institute of Medical Sciences</p>
<p>TG is working in healthcare management education: Dr Gupta has been on the academic advisory board of international institute of healthcare management and research [IIHMR] Delhi and is a visiting faculty to Apollo Medvarsity and Chitkara University.</p>	 
<p>TG has been doing product management consulting for consolidating the Healthcare Application portfolio of TCS</p>	 <p>TATA CONSULTANCY SERVICES</p>

*TG believes in a Partner Ecosystem based on trust and integrity. TG treats all its vendors, collaborators and customers as valuable partners.

TG PARTNERSHIPS/ EXISTING RELATIONSHIPS

Apollo Medvarsity University Hyderabad

**Dr Gupta is a Visiting Faculty
March 2012 – Present**

Manipal University

**Dr Balaji is a Visiting Faculty for MBA
Healthcare
Oct 2011 – Present**

Chitkara University Chandigarh

**Dr Gupta is a Visiting Faculty
August 2012 – Present**

ICT Sub-group of SIC in Health, part of the National Innovation Council, under PMO, Govt of India

**Dr Gupta is a Member
July 2011 – Present**

International Institute of Health Management

**Research, New Delhi
Dr Gupta is the Member of Academic Advisory
Council
April 2009 – April 2013**

Indian Association of Medical Informatics (IAMI)

**Dr Gupta is a Member
May 2001 – Present**

HIMSS Asia Pacific India Chapter

**Dr Gupta is a Board Member
January 2013 – Present**

CREO Strategic Solutions LLC.

**TG is discussing a strategic partnership with
Kevin Fickenscher, MD., amongst top 10
Physician Executives in US.**

**Dr Gupta is a owner of LinkedIn Supergroup
Healthcare-IT/ EHR/ HIS with ~40k members
mostly from Senior Mgmt and CxO level across
US and Globally.**

**TG has been a co-sponsor of Healthcare CloudSlam ,
July 2013, held in Santa Clara USA**

Ivey International Centre for Health Innovation Canada

**Dr Gupta is a Health Innovator in Residence, i.e.
equivalent to Industry Guide for MBA students
January 2013 – Present**

**Fiset Inc. – TG has signed a MoU with Martin Fiset, a
famous hospital planner from Canada. Martin
has over 40 yrs of experience in healthcare
facilities programming and planning
consultancy.**

April 2012 – Present

University of Missouri

**Dr Balaji is a member of the Healthcare R&D
Advisory Board of the University.**

CASE STUDY: HEALTHCARE IT STANDARDS CONSULTING

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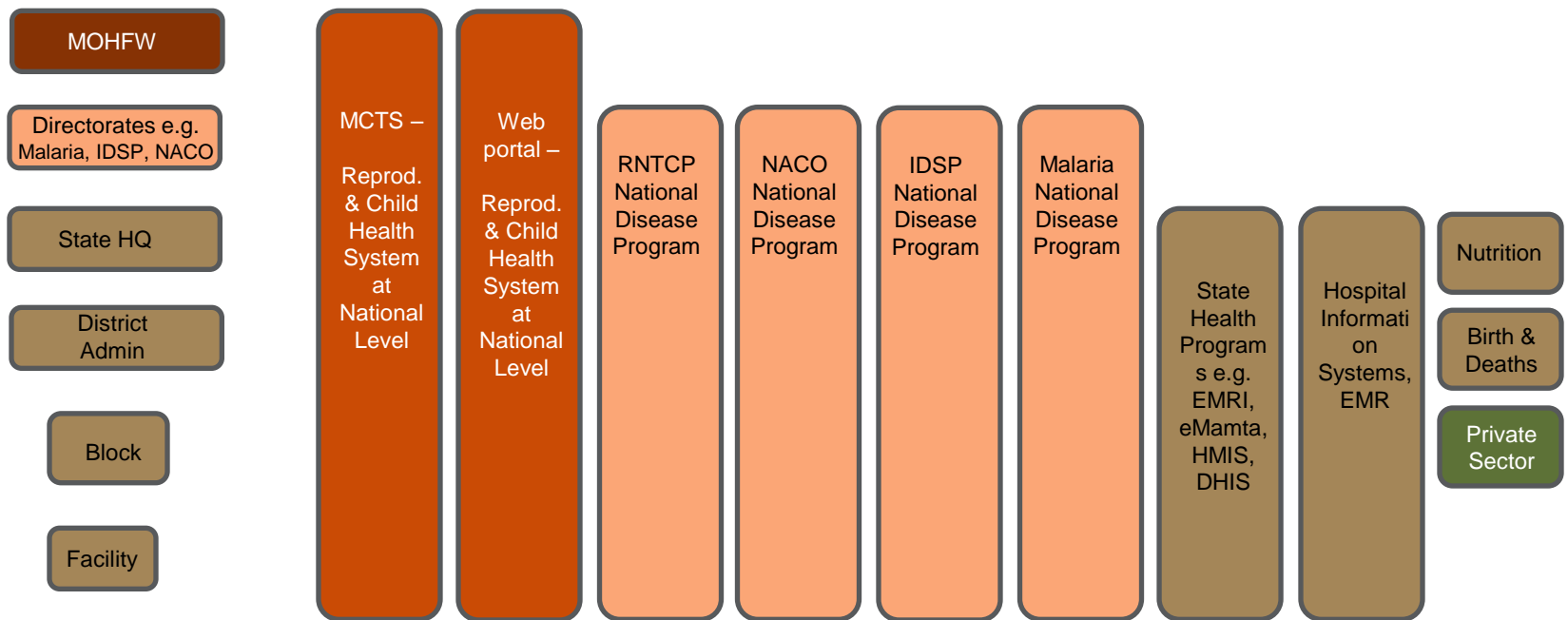
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ALL PUBLIC HEALTH IT SYSTEMS ARE IN SILOS



- Programs/ directorates/ states have their own IT solutions for program reporting needs.
- Silos - All systems functioning in silos and doesn't help in integrated decision making.
- Standards lacking – Architecture, I/O Data standards, Disease and Service codes, Interoperability standards.
- Design issues- Developed as Application for single purpose not as products
- Capacity building - change management is limited
- Process transformation - business process reengineering not done

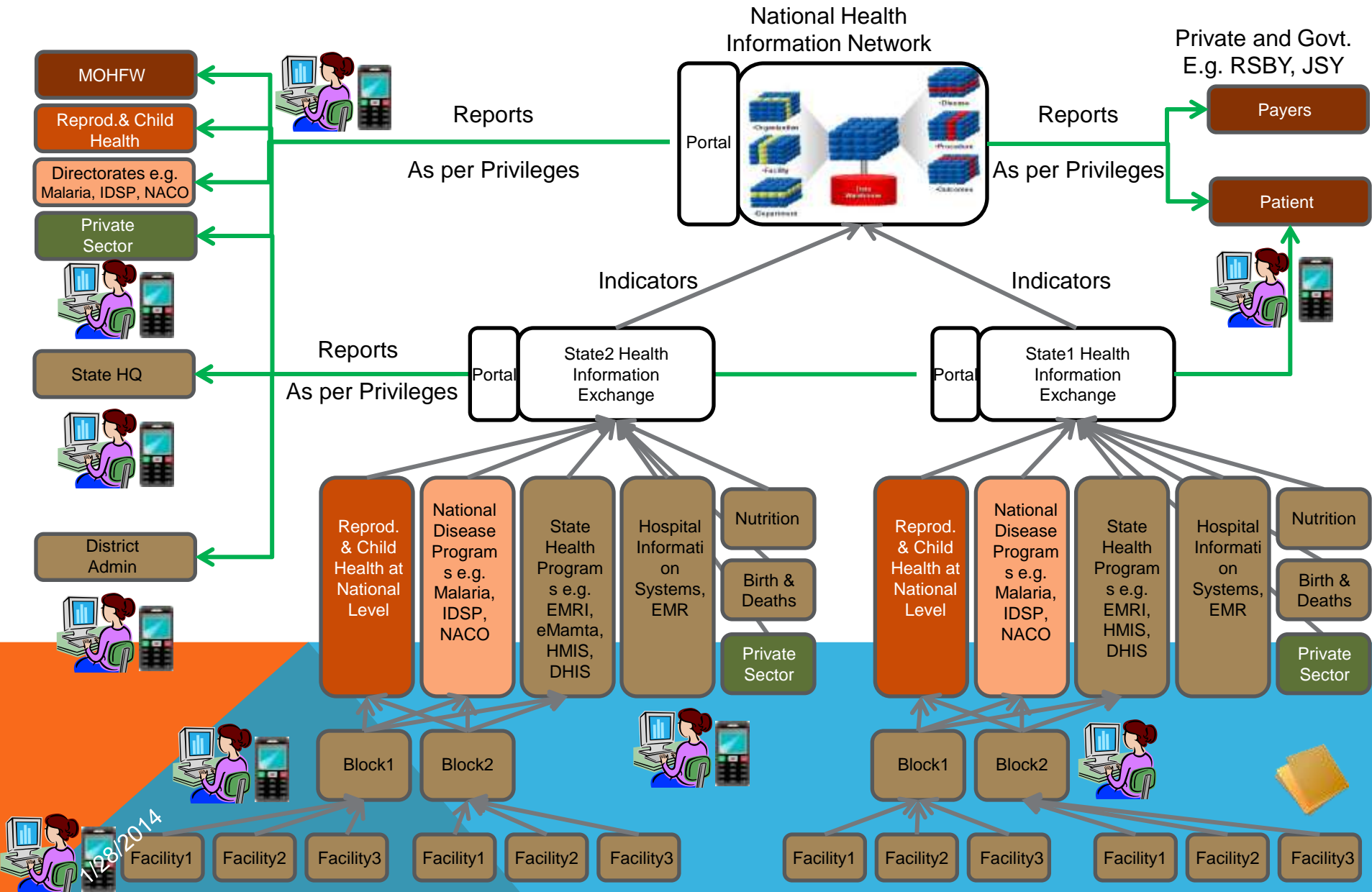
PROPOSED NATIONAL E-HEALTH AUTHORITY TO DEFINE THE NATIONAL E-HEALTH ARCHITECTURE

E-Health Architecture: Key features

- Information exchanges [HIE], State & National.
- Registries and UID
- Set of Standards
- Flexible Data Input
- Flexible Data Output
- Online and offline modes
- Integration across systems
- Single System for field workers
- Multi modal connectivity
- Data privacy and security
- ICT for quality of care
- Capacity Building
- Procurement standardization



PROPOSED NATIONAL E-HEALTH ARCHITECTURE



CASE STUDY: MDDS HEALTH DOMAIN STANDARD

- MDDS is an initiative taken by Department of Electronics and Information Technology (DeitY) to promote the growth of e-Governance within country by establishing interoperability across e-Governance applications. This will help in semantic standardization and when aligned with the integration solutions will ensure interoperability among disparate systems.
- In this regard MoHFW has prepared MDDS standards over last 4 months under the leadership of the Committee on MDDS for Health Domain with active participation of NIC, NHSRC, CDAC, Taurus Global Consulting, United Health Group and a number of technical partners and officials of MoHFW.
- The MOHFW organized a draft standards roll-out workshop on 12th December 2013. The purpose of this workshop was to appraise all stakeholders on the developments so far and deliberate on strategies for roll-out of the standards. Inputs received in this workshop will help in improving these standards. It will also help in bringing consensus for the nationwide implementation of these standards.
- The Meta Data & Data Standards are now placed in public domain for a period of one month for review, suggestions and feedback. These can be accessed from

Building Blocks of MDDS Health Domain

- The health domain landscape are broadly divided into 39 *Entities*.
- These entities are described and qualified with the help of 1077 *Data Elements*.
- Values of Data Elements are categorized under *Data Elements (735)*, *Values List (201)* & *Code Directories (141)*
- *Meta Data* are constructed to define *each Data Element and Code Directory* to establish Interoperability Standards
- Interoperability Standards
- Reference Architecture for Interoperability

Institutional Interoperability

Syntactic Interoperability

Semantic Interoperability

POINT OF VIEW: CUSTOMER RELATIONSHIP MANAGEMENT IN HEALTHCARE

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WHY DID CRM DEVELOP?

CRM developed for a number of reasons:

Consumer Power: CRM came with onset of consumer revolution

Commoditised: Product and service became standardised and commoditised

Downward Pricing: Providers had little pricing power

Quality: Providers had to compete on quality

Relationships: The only protection available to providers of goods and services was in their relationships with customers



WHAT DOES CRM INVOLVE?

CRM involves the following:

Needs: Providers must become sensitive to customer needs

Adapt: Providers must adapt to customer needs and rapidly evolve their products/services

Feedback and Improve:
Continuous improvements should be institutionalised by doing market research to assess customer needs and satisfaction



PATIENT RELATIONSHIP MANAGEMENT [PRM]

- **Outreach:** Deploying customer relationship management (CRM) for sales and marketing has helped various businesses build long-term customer relationships by proactively understanding and serving the needs of customers. Healthcare providers can do the same.
- **Coordination:** In healthcare facilities patient related non- clinical tasks are often managed in isolation creating undue pressure on healthcare providers; creating a need for patient related non-clinical patient relationship management solutions to achieve customer expectations and cement customer loyalty within the demands of time.
- **Case Management:** The healthcare providers can move beyond treating episodes of illness by deploying CRM and can seamlessly address patient relationship management (PRM) needs, enabling proactive care by establishing long-term relationships with patients and achieve improvements in patient care and satisfaction and integrating with their current systems.

PRM FOR OUTREACH PROGRAMS



Educate Patients, Develop
& Improve Relationships

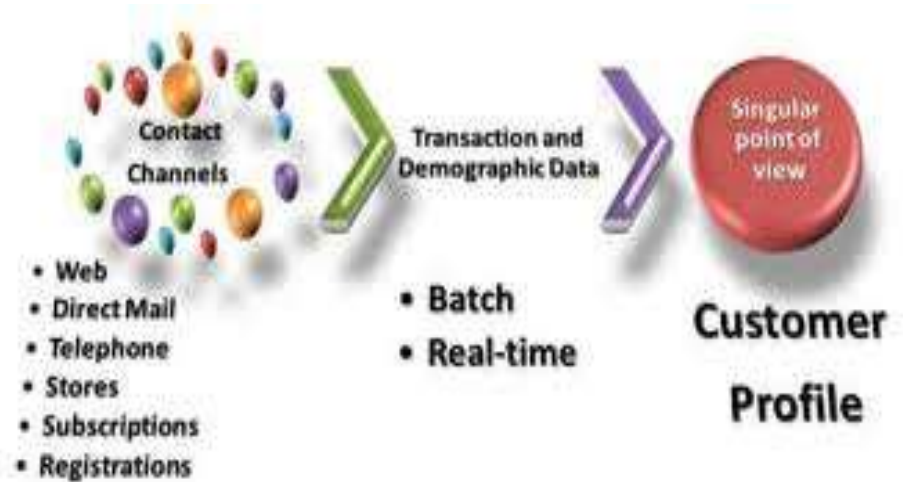
Target Group Campaigns

Patient Education on
Health, Hygiene and
Wellness

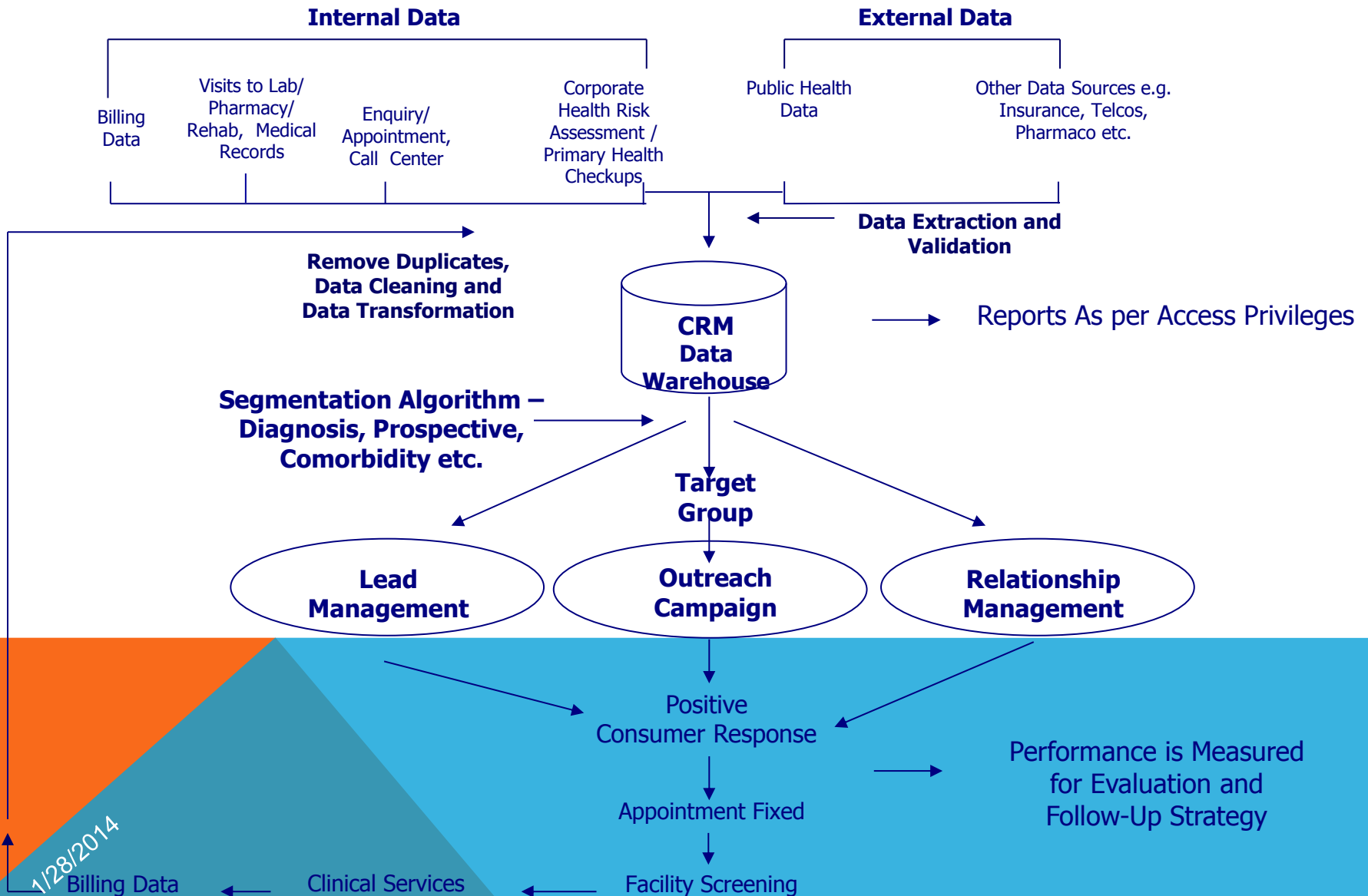
Promote Service
Offerings

Improve Patient -
Physician - Community
Relations

CUSTOMER PROFILE AND PREFERENCES LOST IN MULTIPLE SYSTEMS



PATIENT RELATIONSHIP MANAGEMENT SOLUTION – CONSOLIDATED APPROACH



PRM - OUTREACH CAMPAIGN



- A new campaign is budgeted and approved.
- CRM is used to select the target group.
- CRM tool manages the focused campaign to your target group.



Campaign responses are **captured**;
performance is **measured**
for evaluation

STRATEGICALLY IMPORTANT CUSTOMERS

PRM focuses on strategically significant markets. All customers are not equally important

Chronic Disease: Longterm relationships should be built with customers that are likely to use the services often

High Risk Patients: Also important customers are those who serve as benchmarks for other customers

Cosmetic and Wellness: customers who inspire change in the provider

More than the basic focus on customers that may not require the services often, could result in a loss of time and effort e.g. Patients admitted in hospital for acute infections



PRM in Case Coordination



Coordinate Patient Activities
Between Clinicians, Departments
and Healthcare Organizations

Referrals - GP, Specialist,
Hospital, Lab, Rad, Rehab

Effective
Communication among
Health Care Team

Pre Admission
Information and
Instructions

Post Admission
Instructions / Follow-Up

PRM FOR CASE COORDINATION

- Non-Clinical coordination for Patient
 - Ambulatory Health assistance hotline
 - Patient Education – Disease and Procedure related
 - Pre Admission Instructions
 - Post Admission Information
 - Prognosis and Rehab Information
- Provide information about Doctors
- Appointment management
- Referrals Management
- Manage patient movement between the healthcare facilities
- Social Media – Connect patient to other patients in self help groups



EFFICACY VERSUS EXPERIENCE

“Hospitals spend their efforts in clinical results and process improvement (which) can be measured objectively. The patient, however, judges quality by his or her perceptions, something that ... cannot be verified in the same way as outcomes. The patient is judging the overall experience of being in the hospital.”

Lee F. If Disney Ran Your Hospital, Second River Healthcare Press, 2004

IMPORTANCE OF PATIENT EXPERIENCE

Patients will make clinical decisions based on non-clinical information.

Case of the ‘Dead Fish’ in the waiting room aquarium – the patient thinks, ‘If they can’t take care of a fish, how can they take care of me?’

Gabriel BA. Your Complete Guide to Patient Service, Physician’s Practice, March 2008

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PRM FOR CASE MANAGEMENT



Manage Chronically ill
Patients to Improve Health &
Well Being

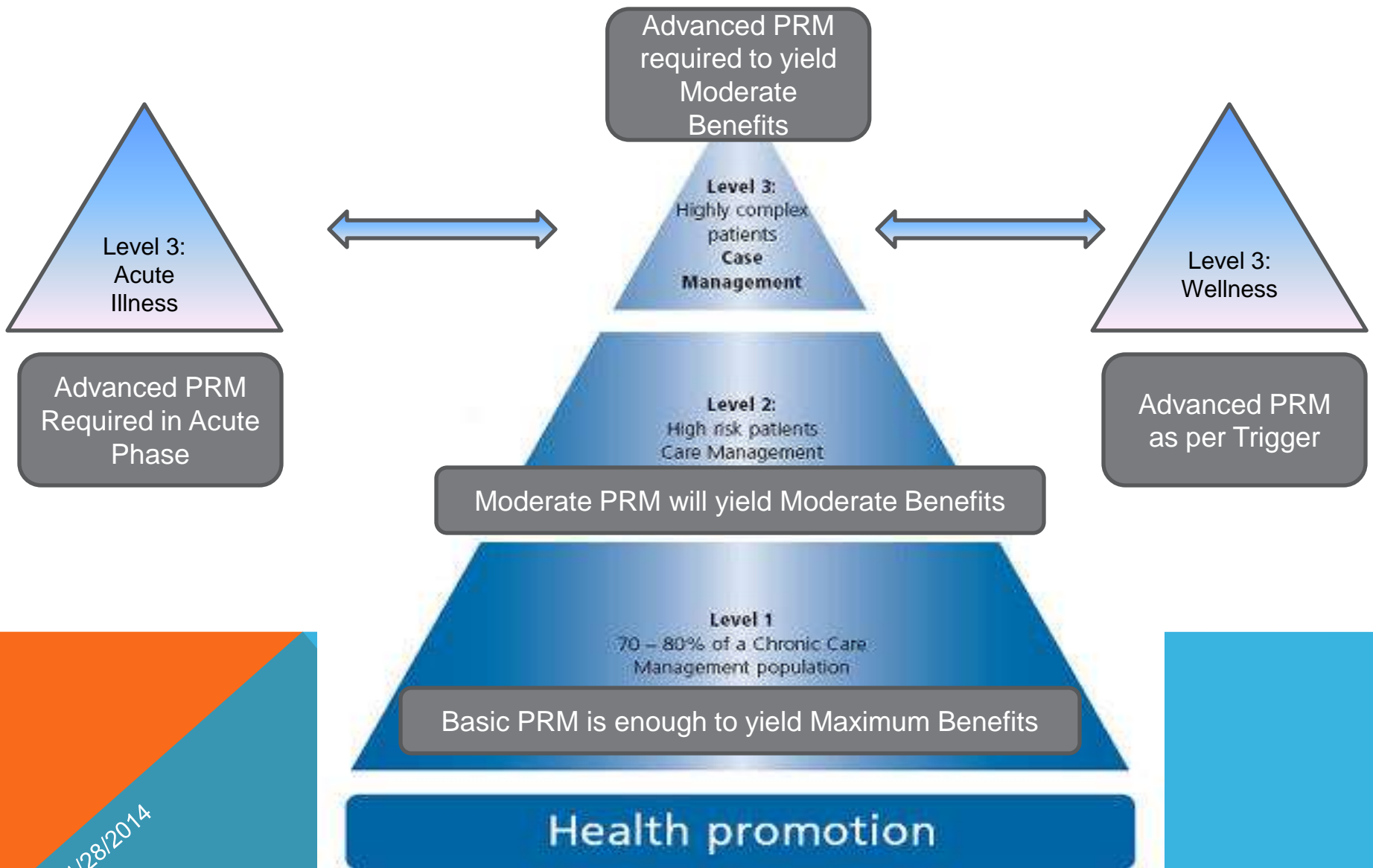
Collaborate Between
Stakeholders

Automate
Communication
Between Stakeholders

Alerts/Reminders based
on Priority Setting and
Patient Safety

Proactive Patient
Management

PATIENT RELATIONSHIP MANAGEMENT PYRAMID

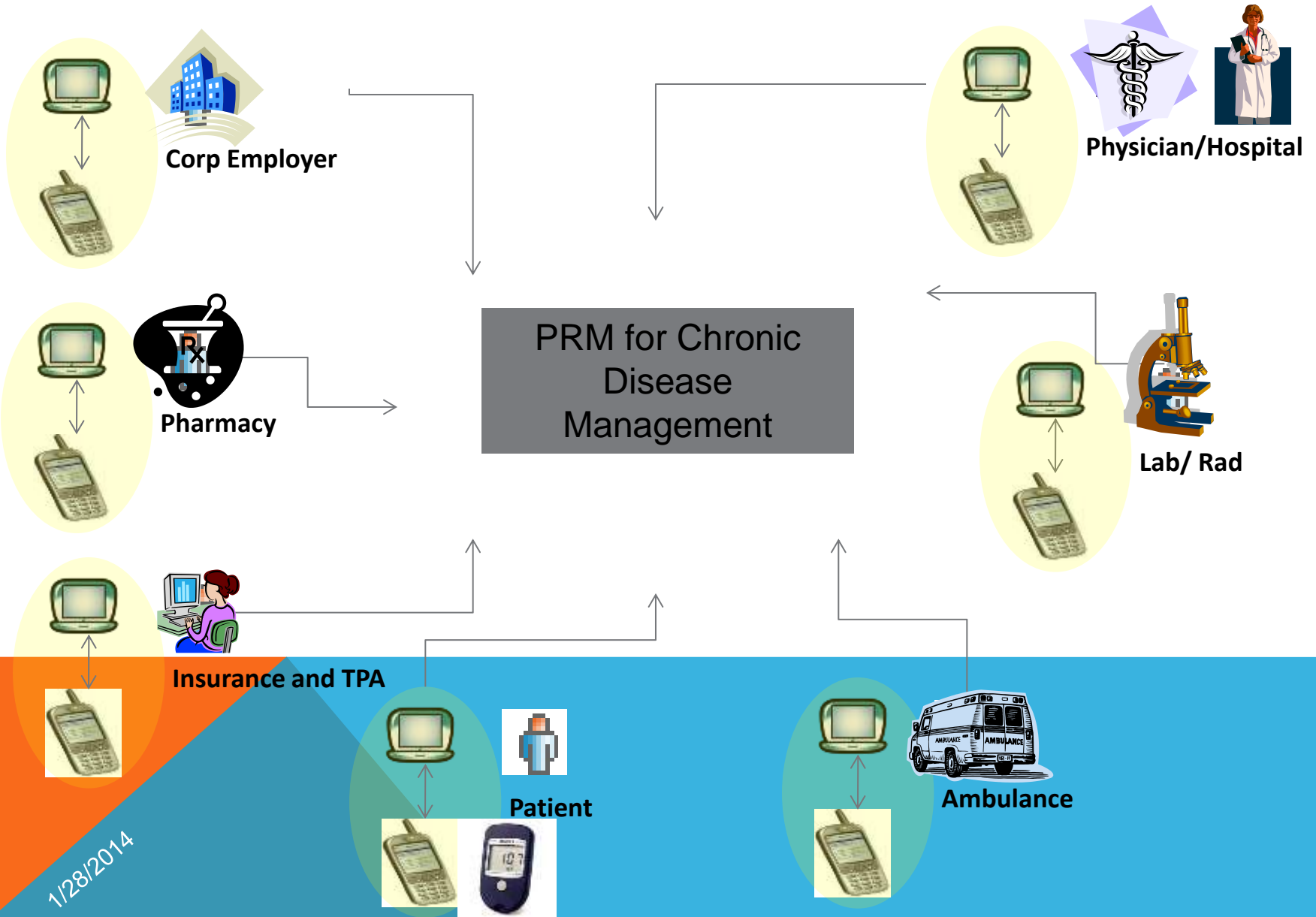


PRM FOR CASE MANAGEMENT

Manage relations between Patients, Physicians, Hospitals, Labs, Pharmacy etc.

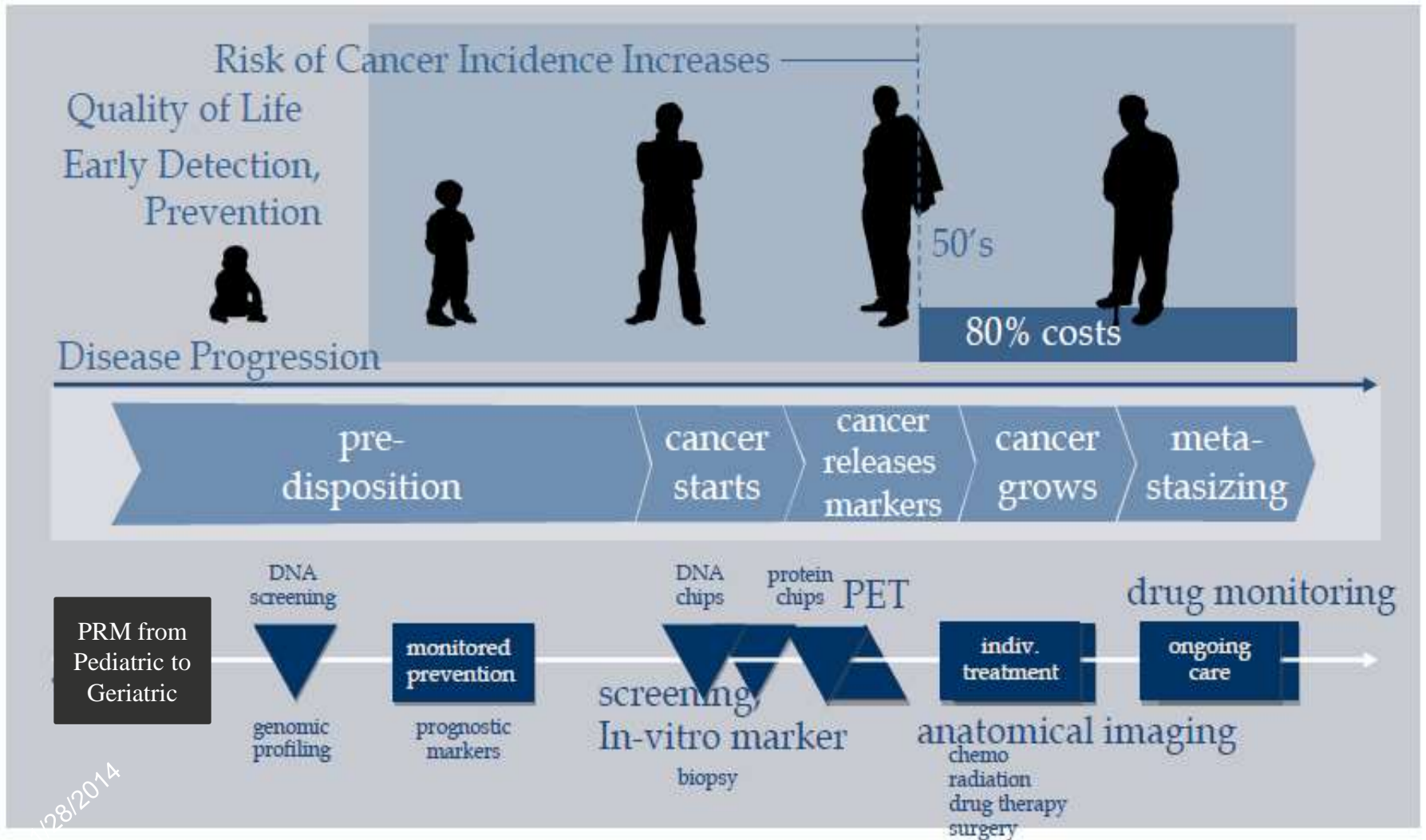
- **Involve family or care giver [permission-based] for drug compliance**
- **Communication**
 - **Reminders** - Appointments with doctor, Labs, Prescription reorder etc.
 - **Alerts** - Missed medication alerts to care coordinators
 - **Tips** - Library for health tips e.g. Diabetic campaign
 - **New Therapy** - Clinical trial information e.g. Oncology
 - **Education** - Education about health, hygiene and wellness
 - **Event reminders** e.g. Free BP/Glucose monitoring, Yoga camp, Women health, Wellness lecture etc.
 - **Brand awareness** - Communicate hospital achievement to patients, community etc.
- **Trends** - Visualize disease patterns in patients, practice, community etc.
- **Knowledge management** - blogs and social media for self help groups
- **Barcode** based document and asset management

PRM ACROSS STAKEHOLDERS



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PRM IN CANCER CARE - EXAMPLE



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THANKS

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