"Intranets" Bring The Revolution Home

BY TOM LAWRY

W hile the Internet gets a lot of attention for expanding consumers' access to health information, another computer tool is revolutionizing the way healthcare workers share information *inside* their organizations. This tool, which uses the same technology as the Internet, is known as the "intranet."

An intranet is essentially a private internet that operates on a healthcare organization's secure internal network and is accessible to the organization's employees and physicians. Its purpose is to improve people's access to the information they need to do their jobs.

With an intranet, an organization can put necessary information at all its employees' fingertips. For example, an intranet is a great tool for managing the "how to" information that is required by the Joint Commission on Accreditation of Healthcare Organizations and normally found in policy and procedure manuals. Such manuals are expensive to maintain and unwieldy to use. By creating a policy and procedure library on its intranet, a healthcare organization can dramatically reduce the effort and expense ordinarily involved. Authorized employees can access policies and procedures in a way that is fast, efficient, and practical.

AN INTRANET'S BENEFITS

An intranet can, when effectively developed, produce benefits all managers have on their wish lists:
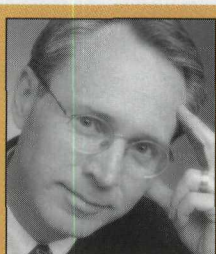
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increased productivity, streamlined processes, better teamwork, and empowered employees.

Consider the results at PeaceHealth, a Bellevue, WA–based healthcare system sponsored by the Sisters of St. Joseph of Peace. Since installing an intranet 18 months ago, PeaceHealth has documented six-figure cost savings through streamlining internal job applications, access to policies and procedures, and organizational surveys. Today 80 percent of PeaceHealth's 6,500 employees use the intranet at least once a month.

TIPS ON CREATING AN INTRANET

The creation of an intranet does not in itself guarantee success, however. Here are some tips for building one that is effective.

Clearly Define Your Goals Before deploying any intranet technology, you should first decide which services you want it to provide. In showing how those services can support your organization's mission and goals, you will define the intranet's value.

"Make sure your intranet initiative is not a case of 'technology looking for a purpose,'" says Larry Paulson, vice president, information services, Catholic Health Initiatives (CHI), Tacoma, WA. "It is critically important to have the business goals and strategies drive the planning and development of an intranet."

Include Users on the Collaborative Intranet Team "A successful intranet requires a unique marriage of technical knowledge and business practice innovation," says Sharon Massey, intranet services leader for the Sisters of Providence Health System, Seattle. "Such a partnership should exist from the moment you decide to pursue an intranet. The skill set of an intranet team should include technical expertise for Internet technology. It should also include those who understand and relate to what is important to senior management and frontline users."

Strategic leadership will be an important element in the intranet team's success, says Paulson.

MORE ABOUT INTRANETS

The following online resources provide information about the planning necessary for a high-value intranet.

• Developing Your Intranet Strategy: www.cio.com/WebMaster/strategy/ *CIO* magazine developed this presentation for nontechnical audiences. It gives a good overview of the planning process and is "downloadable" for group use.

• The Complete Intranet Resource: http://intrack.com/intranet/ This is a well-organized site containing explanatory articles and white papers, as well as an active discussion group.

intended a broad interpretation of that term. In the proposed regulations the OIG indicates its belief that healthcare abuse would include "verbal, sexual, physical or mental abuse, corporal punishment, involuntary seclusion or patient neglect or misappropriation of patient property or funds." The OIG seeks comments on whether such a broad definition, or any definition that would capture the range of the adverse actions specified by Congress, should be included in the regulations.

The definition of "health plan," the only private entity that must report and which may query the HIPDB, is also rather broad. Health plans are defined as including those plans, programs, or organizations that "provide health benefits, whether directly or through insurance, reimbursement or otherwise." The proposed regulations specifically acknowledge that credentials reviews and fraud investigations are often conducted at the corporate level by organizations offering and managing managed care plans or other health-benefit plans or services, and therefore the broad construction of the term "health plan" is justified.

SOME KEY PROBLEMS
In addition to its ambiguities and its broad definitions, the HIPDB expressly excludes acute care hospitals from accessing its information. Since the NPDB, acute care hospitals have been in the forefront of reporting information on corrective actions against practitioners and using such information from the NPDB in the peer review and credentialing process. The HIPDB reverses this traditional flow of credentialing information.

In the past, managed care organizations often contracted with physicians and other healthcare professionals if they already had met acute care hospitals' credentialing standards. Moreover, in the explosion of managed care contracting that has occurred, much of the managed care credentialing process, including NPDB checks, has been conducted by medical groups, independent

physician associations, and others that have been "delegated" or "subdelegated" by a managed care organization to obtain this information. Through HIPAA and the HIPDB, Congress, and now the OIG, is clearly holding health plans responsible for obtaining such information from the HIPDB themselves. This new accountability for managed care organizations will create more liability exposure for them whether they retain or terminate practitioners with adverse HIPDB reports.

Managed care organizations will now receive more requests for information on physicians and healthcare professionals from acute care hospitals, and will need to have legally correct information-sharing agreements with hospitals. They will also need to make tough decisions regarding provider contracting and credentialing.

The inability to access the HIPDB will be frustrating for hospitals and healthcare delivery systems that have instituted corporate compliance programs. Healthcare compliance programs must deal with practitioner credentialing issues, particularly questions relating to practitioners who do not participate in Medicare, or who have civil judgments or sanctions against them. If hospitals cannot access HIPDB information promptly and directly, but are held to a high corporate credentialing standard, their hands will be tied. Whether or not Congress will recognize this and amend HIPAA to permit hospitals to access the HIPDB remains an open question. Nevertheless, making tough credentialing decisions regarding practitioners is an essential process, one that will not be made any easier by the HIPDB. □

NOTES

1. Mark A. Kadzielski, "Practitioner Data Bank to Open Soon," *Health Progress*, March 1990, p. 87; "Does the Data Bank Inhibit Peer Review?" *Health Progress*, December 1990, p. 58.
2. 63 Fed. Reg. 58341 (October 30, 1998).

"Although there should be active involvement by the IS [information services] division, the planning and development should be driven by someone who is clearly focused on the organization's business and operational goals."

Think Big But Start Small Although you need an overarching vision of the ways an intranet can benefit your organization, you should begin by implementing services that add immediate value. CHI began by developing an online telephone directory, because it was easy to use and benefited a large number of users.

Avoid Scattershot Development If you allow different groups to create their own intranet sites or pages without coordination or oversight, you may soon find your organization mired in information chaos.

If You Build It, They May *Not* Come The toughest part of getting your money's worth from an intranet is in motivating employees to actually use it. "To be successful, an organization must actively work at changing expectations and culture," says Paulson.

Create a Realistic Budget Much of an intranet's appeal lies in its low cost of implementation. Even so, you should not implement one without first establishing a realistic budget that includes the costs of staffing it and creating and maintaining its content.

Go See an Intranet in Action "Healthcare systems often create their own intranets without ever having seen one," says Paulson. "It's better to visit a system or hospital that already has an intranet and watch it in action."

When they are successfully implemented, healthcare intranets make better information available to more people at a lower cost. An intranet's value does not come from its technology. It comes from leaders' readiness to provide employees with a new tool and encourage them to improve the way work is done. □