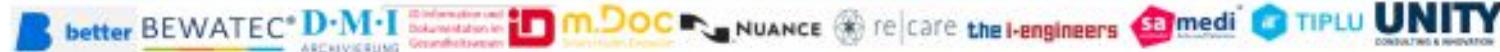




Association of Health Information Management Executives

## 13.-14.05.2020 Kongress Krankenhausführung und digitale Transformation



**Unsere Workshoppartner und Aussteller**

ST. AUGUSTINUS GRUPPE  
engwinkel. menschen. stark.

CHIME  
Associted Health Information Management Executives

Verband der  
Krankenhausdirektoren  
Deutschlands e.V.

**Unsere Veranstaltungspartner**

Rady Children's Hospital San Diego

SAN YSIDRO HEALTH

SHARP San Diego's Health Care Leader

U.S. COMMERCIAL SERVICE United States of America Department of Commerce

UC San Diego HEALTH SYSTEM



### Workshop:

**Bestens vernetzt" HealthCare's Most Wired - am Patient Outcome orientiertes Modell zur Messung des Digitalisierungsgrads von Kliniken und Gesundheits- und Pflegedienstleistern**

14 Jahre ENTSCHEIDERFABRIK

Krankenhauserfolg durch Nutzen stiftende Digitalisierungsprojekte

**„Bestens vernetzt“ HealthCare’s Most Wired - Modell zur Messung des Digitalisierungsgrads  
von Kliniken sowie anderen Gesundheits- und Pflegedienstleistern**

## EINFÜHRUNG

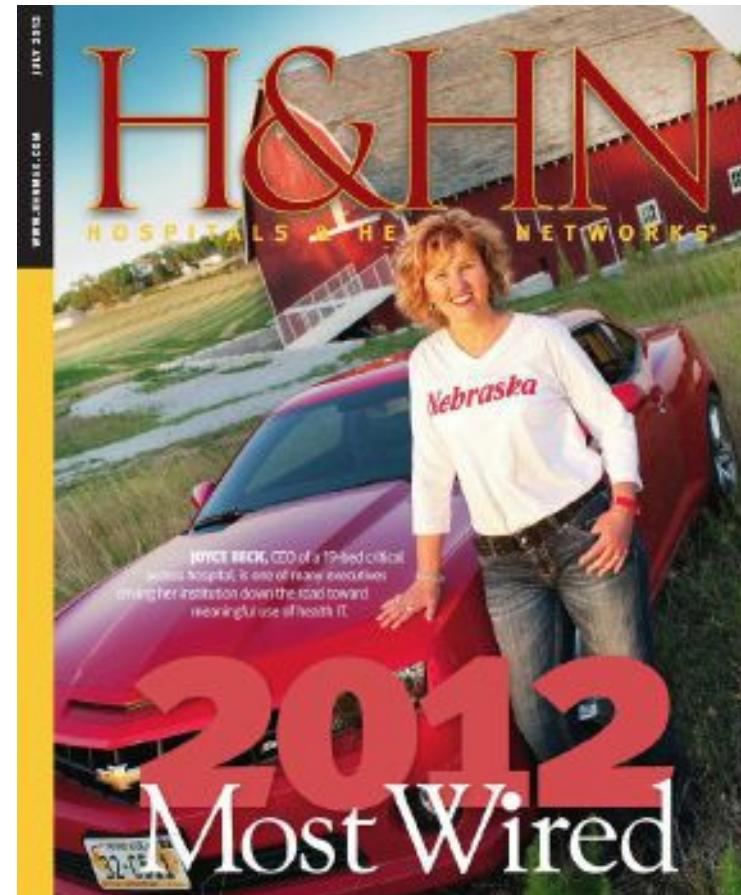
Das „Most Wired“-Programm wurde 1997 von der AHA mit dem Ziel initiiert, die Informationstechnologie in den Krankenhäusern optimal auszubauen und zu nutzen, um die Effizienz und Qualität medizinischer Behandlungen sowie die Patientensicherheit zu verbessern.

Im Rahmen jährlicher Umfragen wurden die Implementierung und Nutzung von Informationstechnologien in den Gesundheitseinrichtungen analysiert/identifiziert und bewertet.

Bis 2017 wurden die jährlichen Ergebnisberichte als „Most Wired“-Survey in Hospitals & Health Networks (H&HN) veröffentlicht (s. Beispiel 2012).

2017 hat die CHIME von der AHA das „Most Wired“-Programm übernommen und inzwischen zu einem Zertifizierungsprogramm für den Digitalisierungsgrad von Gesundheitseinrichtungen weiterentwickelt (Klassifizierung in 10 Stufen).

Ziel des Workshops ist, die Adaption von „Most Wired“ für das deutsche Gesundheitswesen zu analysieren und zu diskutieren.





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# Agenda

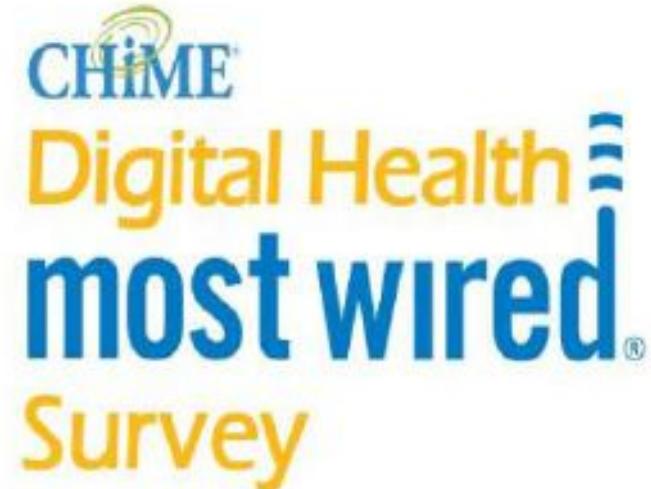
1	<b>Challenges (Herausforderung)</b>
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7	Outlook (Ausblick)



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# MW – Digital Health Program Overview

*Presentation of  
Russ Branzell,  
President & CEO, CHIME*



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## History of Most Wired

**From 1997 to 2017 the program was owned and operated by the American Hospital Association; the survey has been active for 21 years.**

**In late 2017, CHIME acquired the program. The entire MW Digital Health program has been reengineered to survey, evaluate, benchmark and recognize the standards necessary to achieve high performance through digital health excellence.**





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## Strategic Program Updates:

- Annual program updates to reflect current and emerging digital health requirements and best practices.
- MW Digital Health Program reengineered to mirror the Malcolm Baldrige National Quality Program (USA's highest quality award).
  - Certified Scoring and Performance Brands (Level 1 – 10).
    - Special Recognition at Level 7 and higher.
  - Advanced digital and in-person verification process for Level 7 and higher.
    - MW Digital Health expanded to include
      - Ambulatory Survey
      - International Survey
      - Long-term Care Survey
    - International Expansion to include 13 Countries
    - Identify key research topics for annual program





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# CHiME® Digital Health most wired® Survey

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## Mission:

To elevate the health and care of communities around the world by encouraging the optimal use of digital health including advanced health information technology.

## How do we do this?

Conduct an annual digital health survey to identify, recognize, and certify the adoption, implementation, and use of digital health technologies/programs by healthcare provider organizations both domestically and internationally.



# Survey Methodology Composition and Scoring

**The Most Wired survey consists of 76 questions, 68 of which are eligible for scoring. The questions are broken out into eight individual segments by topic (see list to the right).**

**The number of points possible for each question varies based on the available response options, which are weighted according to whether they are considered basic or advanced capabilities. The maximum number of points possible for all questions combined is 465.**

**Each participating organization receives an individual score for each of the eight segments as well as an overall score for all segments combined. Each of these scores represents the percentage of points the organization achieved out of the total number of points possible. For example, an organization that earned 90% of all points possible would receive an overall score of 90.**

Survey Segments	Points Possible	% of Overall Score
Infrastructure	49	10.5%
Security	90.5	19.5%
Administrative Supply Chain	85	18.3%
Analytics/Data Management	42	9%
Interoperability Population Health	50.5	10.9%
Patient Engagement	65.5	14.1%
Clinical Quality and Safety	82.5	17.7%
Innovation and Emerging Technologies	Not Scored 0	Not Scored 0
Total	465	100%



# MW Digital Health Certification Levels

We have incorporated a system that allows participating organizations to better benchmark their level of adoption and outcomes achieved. These certification levels will help ensure that the Most Wired program continues to be a catalyst for technology adoption that improves patient outcomes and engagement.

As with all things, the standard will continue to grow and mature, allowing organizations to clearly benchmark against peers and the defined worldwide industry standard. Every participant will be certified at a level that represents their respective achievements.

Levels are based solely on an organization's raw score without consideration for how this score compares to the scores of other participants.

Score Range	Most Wired Certified Level	Most Wired Recognition (applicable only to Overall Score)
90.1–100.0	Level 10	Superior Performance Excellence Award
80.1–90.0	Level 9	Performance Excellence Award
70.1–80.0	Level 8	Quality Award
60.1–70.0	Level 7	Special Recognition
50.1–60.0	Level 6	Most Wired Participant
40.1–50.0	Level 5	Most Wired Participant
30.1–40.0	Level 4	Most Wired Participant
20.1–30.0	Level 3	Most Wired Participant
10.1–20.0	Level 2	Most Wired Participant
0.0–10.0	Level 1	Most Wired Participant



# Descriptions of Certification Levels

**Levels 9–10:** In addition to meeting the criteria for levels 1–8, organizations in level 9 or 10 are often leaders in healthcare technology who actively push the industry forward. Not only have many of them implemented advanced technologies, but they often leverage these technologies in innovative ways and have encouraged deep adoption across their entire organization. As a result, they are realizing meaningful outcomes, including improved quality of care, improved patient experience, reduced costs, and broader patient access to healthcare services. Some of the advanced technologies used to achieve these outcomes include telehealth solutions, price-transparency and cost-analysis tools, access to data at the point of care, and tools to engage patients and their families throughout the care process.

**Levels 7–8:** Organizations in levels 7 and 8 meet the criteria for being designated as Most Wired. These organizations have deployed technologies and strategies (e.g., population health/cost-of-care analytics, HIEs/integration engines, and patient portals) to help them analyze their data and are starting to achieve meaningful clinical and efficiency outcomes. Some of these organizations are experimenting with more advanced technologies, like telehealth, that expand access to care.

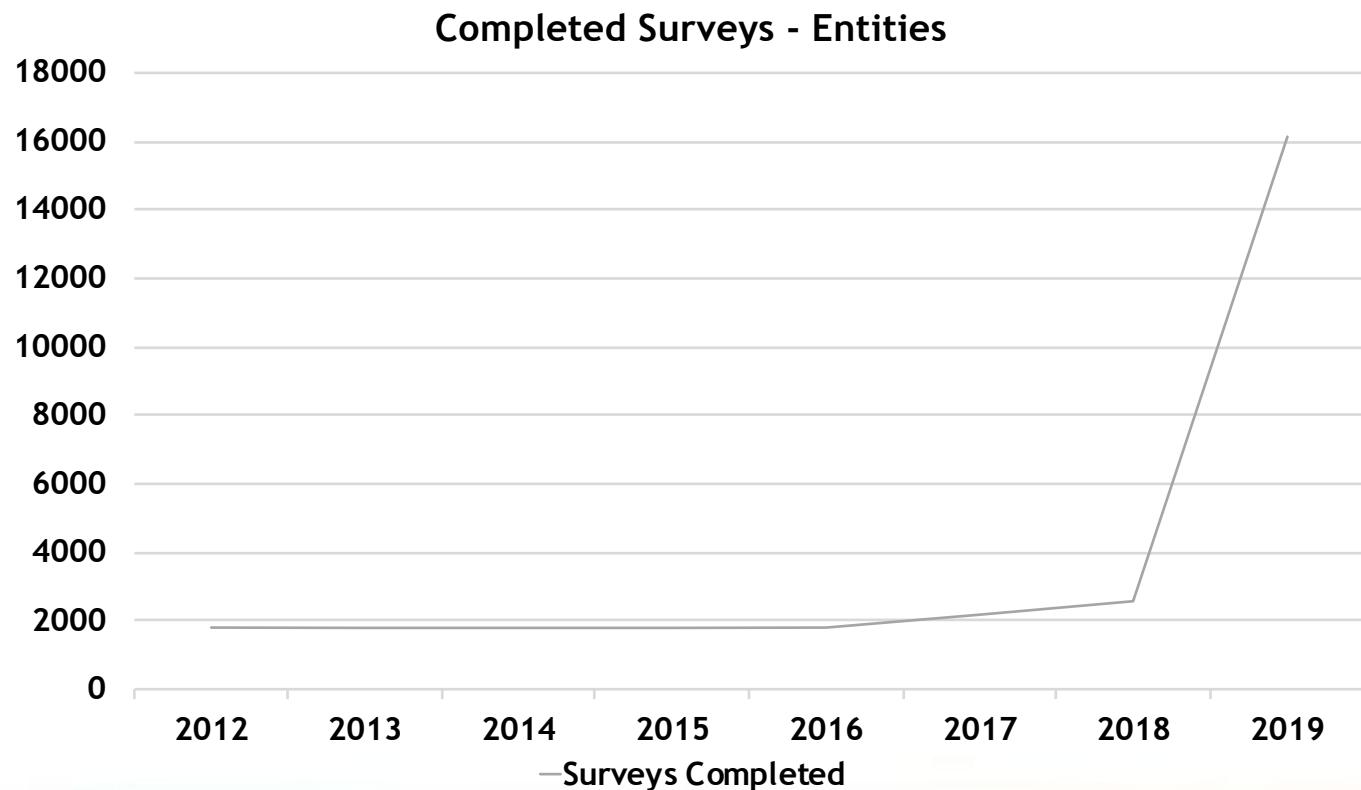
**Levels 4–6:** Organizations in levels 4–6 have made progress in expanding their core IT infrastructure to support internal strategic initiatives. Often, they have implemented basic technologies to protect patients' health and financial information (e.g., firewalls, spam/phishing filters, endpoint encryption), but they may lack more advanced technologies that would mediate other vulnerabilities. Many are actively collecting patient data electronically; however, they may not effectively leverage the data they collect and may encounter significant barriers in exchanging patient data with external organizations.

**Levels 1–3:** Organizations in levels 1–3 are in the early stages of developing their technology infrastructure and may still be transitioning, or may have more recently transitioned, to electronic formats for collecting patient data and performing clinical activities. Some may have deployed technologies that capture data (e.g., EMRs, ERP solutions, revenue cycle management solutions) but may not fully leverage the functionality these technologies offer. Additionally, these organizations may still be working to help end users adopt the technologies that have been implemented.



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## MW Digital Health Survey and Results, 2019

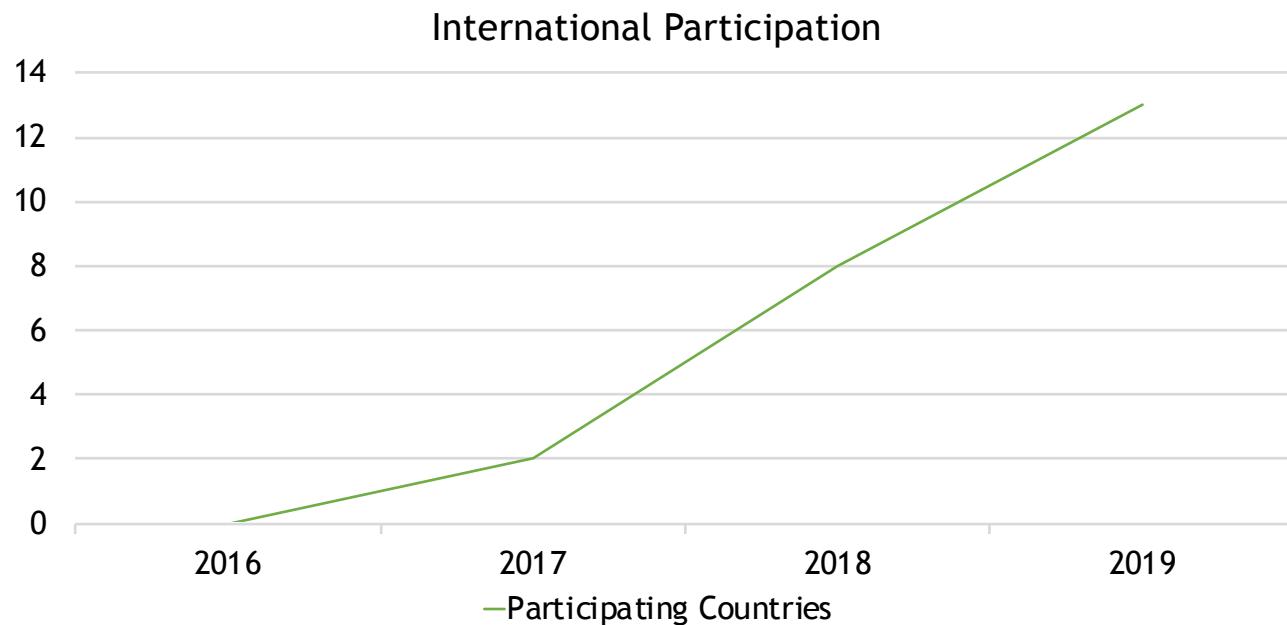




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## MW Digital Health Survey and Results

**Global Participation:** 16,138 organizations were represented, which included three separate surveys: domestic, ambulatory & international. International- 13 countries participated.



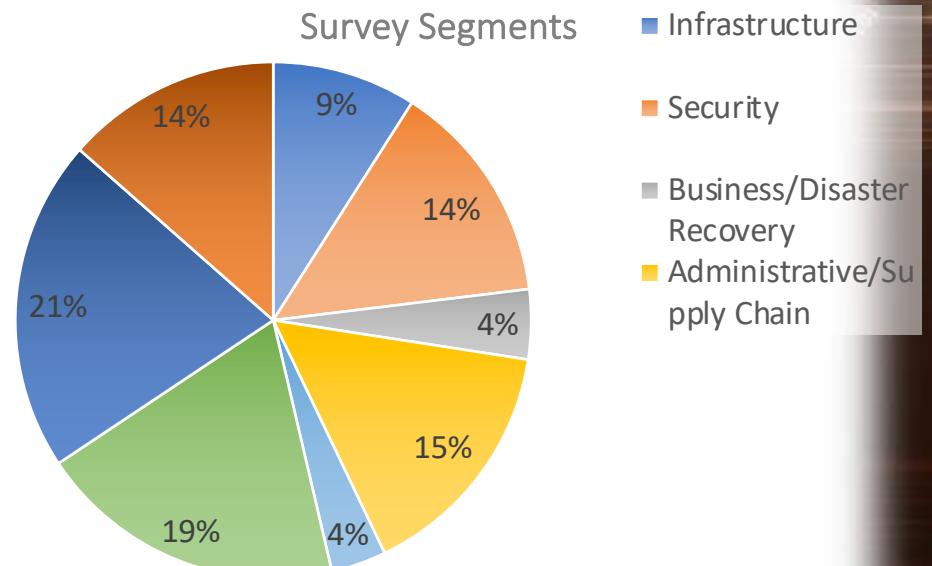
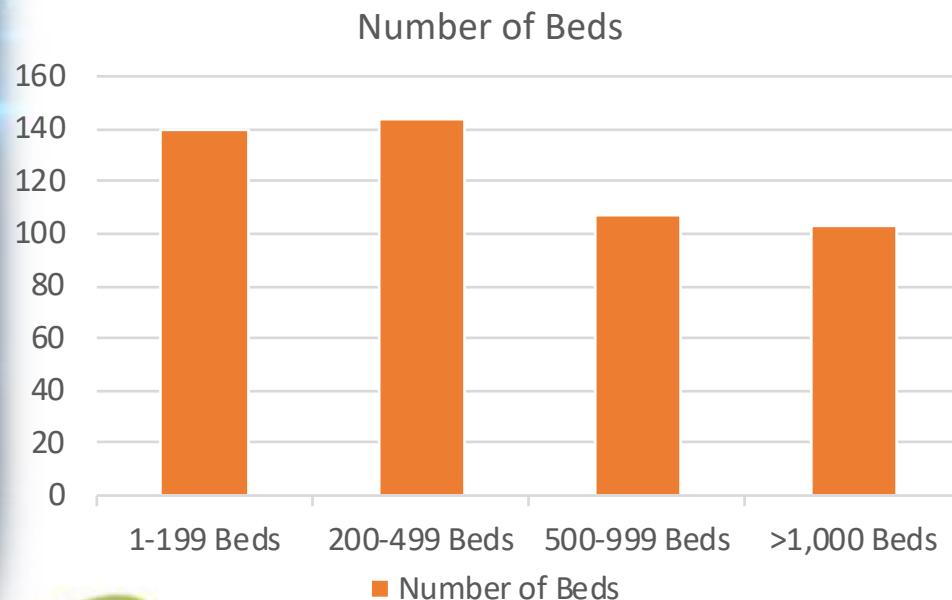


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# Healthcare's Most Wired Survey and Results

**Participation: 16,138 organizations were represented, which included three separate surveys: domestic, ambulatory & international.**



Cambridge University Hospitals NHS Foundation Trust

MOST WIRED CERTIFIED LEVEL

7

Receives Special Recognition



Overall Score—Level 7

67.2

0.0

100.0



## Geisinger Health System

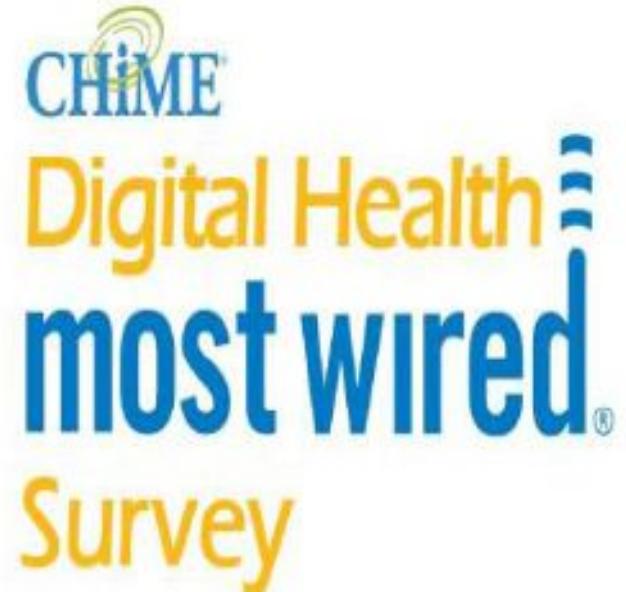
MOST WIRED CERTIFIED LEVEL

9

Receives a Performance Excellence Award



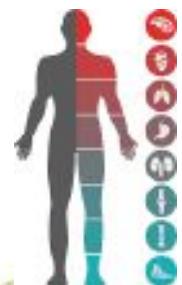
Overall Score-Level 9





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## MW Digital Health Survey –VS- Other Measurement Systems



- VS -



CHiME



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## German MW Digital Health Survey



2000+ Hospitals

140,000+ Physicians/Psychotherapists

CHiME  
Digital Health  
most wired.  
Survey



CHiME



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CHiME®

# Challenges (Herausforderungen)

Pos.	TOP
1	<ul style="list-style-type: none"> <li>▪ On one hand the Healthcare Providers have to serve more &amp; more Patients and on the other hand for serving Patients we have less well-trained Care Givers</li> </ul>
2	<ul style="list-style-type: none"> <li>▪ Less Patient orientation</li> </ul>
3	<ul style="list-style-type: none"> <li>▪ Less Care Giver orientation</li> </ul>
4	<ul style="list-style-type: none"> <li>▪ Less Process orientation</li> </ul>
5	<ul style="list-style-type: none"> <li>▪ How much we have to invest in digitalization to achieve this orientation ?</li> </ul>
6	<ul style="list-style-type: none"> <li>▪ We know, that we have to do more in digitalization. But we don't know in which areas we should invest first, second, third, etc. to achieve the best for our organization ?</li> </ul>
7	<ul style="list-style-type: none"> <li>▪ If we invest in the priority, i.e. first, second, third, etc. which results we should achieve ?</li> </ul>
8	<ul style="list-style-type: none"> <li>▪ If we achieve „the“ results, what does this mean for us – are we „very good“, „good“, „okay“, „worse“, etc. ?</li> </ul>



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7	Outlook (Ausblick)

# Scope of work (Aufgabenstellung)

Pos.	TOP
1	<ul style="list-style-type: none"> <li>▪ We need a model to measure digitalization within Healthcare Providers</li> </ul>
2	<ul style="list-style-type: none"> <li>▪ The model to measure digitalization needs real live experiences ... expertise form the Healthcare Provider site</li> </ul>
3	<ul style="list-style-type: none"> <li>▪ The model needs a orientation with respect to the Business Strategy and Vision of the Healthcare Provider</li> </ul>
4	<ul style="list-style-type: none"> <li>▪ The model needs a orientation with respect to the patients</li> </ul>
5	<ul style="list-style-type: none"> <li>▪ The model needs a orientation with respect to our employees &amp; Care Givers</li> </ul>
6	<ul style="list-style-type: none"> <li>▪ The model needs a orientation with respect to our processes in medicine, administration, procurement, etc.</li> </ul>
7	<ul style="list-style-type: none"> <li>▪ Bench Marking must be an USP (Unique Selling Proposition), i.e. across different kinds of Healthcare Providers, Regions, States, Nations, etc.</li> </ul>
8	<ul style="list-style-type: none"> <li>▪ The measurement needs sustainability, we have to this yearly to improve ourselves</li> </ul>



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Healthcare's

**"Most Wired Program"**

**"Bestens Vernetzt",**

würde den Namen dieses Modell zur Messung des Digitalisierungsgrads von Kliniken übersetzen.

**Warum "bestens vernetzt" ? Weil es um Patient Outcome geht !**

1. Es ist der Grad der Digitalisierung der Kliniken und somit der Durchdringungsgrad mit IT & Prozessen zu messen.
2. Nicht erst seit Covid19 ist zu messen, wie die akutstationäre Klinik der Psychiatrie oder der Somatik in der Region mit dem ambulanten Sektor, den Rettungsdiensten und den postakutstationären Versorgern der Betreuung, der Rehabilitation und der Pflege vernetzt ist!



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- Das “HealthCare’s Most Wired” Programm wurde 1995 von der American Hospital Association (AHA) aus der Taufe gehoben.
- Patient Outcome hat oberste Priorität, d.h. den Patienten im Mittelpunkt zu begreifen und seine Konstitution, sein Wohlbefinden, aber auch sein Urteilsvermögen und seine Kritik- und Entscheidungsfähigkeit als Kunde als Maßgabe für das eigene Tun und Handeln zu begreifen.
- Da 1995 die Auswirkungen der Digitalisierung auf Patient Outcome, d.h. eben nicht nur die Risiken, sondern vor allem auch die Chancen der digitalen Transformation offensichtlich wurden, war es Zeit den Kliniken Hilfestellungen zu geben, d.h. zu messen, wo das Klinikum in der Digitalisierung steht und wo es noch Verbesserungspotential hat.
- Im Jahr 2017 hat das College of Health Information Management Executives (CHiME) das Programm von der American Hospital Association (AHA) übernommen und entwickelt und pflegt dieses nach neusten Erkenntnissen weiter. Die AHA ist darüber sehr dankbar, da für die AHA die Ergebnisse der sich jährlich wiederholenden Messungen wichtig sind, aber die Digitalisierungsgrad Messung kein Kerngeschäft der AHA ist.
- Der Partner für die Deutschen Sprachgemeinschaften und somit die Lokalisierung ist die Association of Health Information Management Executives (AHIME) und die dazugehörige Academy of Health Information Management Executives (AHIME).



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### Mission

- Die Mission des "Healthcare's Most Wired" Programms ist es zu messen, was der Wertbeitrag der digitalen Transformation, d.h. der Wandel in der Patientenversorgung und in den Behandlungsprozessen durch IT, im Klinikum und in der Region, zu Patient Outcome ist. Die Ergebnisse der Digitalisierungsgradmessung leisten somit auch einen elementaren Beitrag, um die Patientensicherheit zu verbessern.
- Durch diese Digitalisierungsgrad Messung und das Aufzeigen von Verbesserungspotentialen wird ein optimaler Einsatz von Informationstechnologie gefördert und der Wandel in der IT-Branche des Gesundheitswesens voran getrieben – Anforderungen der Kliniken und Lösungen der Industrie werden abgestimmter.

### Nachhaltigkeit

- Das Programm ist nachhaltig, da die Messung nicht einmalig, sondern jährlich vorgenommen wird. Jährlich wird der Wertbeitrag von IT-Einführungen, -Implementierungen und -Nutzungen erkannt, identifiziert und zertifiziert.



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## Erhebungsmethodik - Zusammensetzung und Bewertung

- Die Most Wired Digitalisierungsgradmessung besteht aus 95 Fragen, von denen 76 für die Bewertung in Frage kommen.
- Die Messung bzw. die Fragen gliedern sich in acht Segmente (siehe Abbildung). Die Klinik erhält eine Einzelwertung pro Segment und eine Gesamtbewertung.
- Die Anzahl der möglichen Punkte für jede Frage variiert je nach den verfügbaren Antwortmöglichkeiten, die gewichtet werden, je nachdem, ob es sich um grundlegende oder fortgeschrittene IT- und Prozesskompetenz handelt.
- Die maximale Anzahl der möglichen Punkte für alle Fragen zusammen beträgt 492. Jede dieser Punktzahlen stellt den Prozentsatz der Punkte dar, den die Klinik von der Gesamtzahl der möglichen Punkte erreicht hat. Beispielsweise erhält eine Klinik, die 90% aller möglichen Punkte verdient hat, eine Gesamtpunktzahl von 90.

Most Wired Digitalisierungsgrad Messung Segmente	Maximal mögliche Punktzahl	Prozentsatz Gesamtpunkte
Infrastruktur	49.0	10.5
Security	90.5	19.5
Administration / Beschaffungs- & Liefekette	85.0	18.3
Analytics und Data Management	42.0	9.0
Interoperabilität und Population Health	50.5	10.9
Patient Engagment	65.5	14.1
Medizinisch Qualität und Patientensicherheit	82.5	17.7
Summe	<b>465.0</b>	<b>100.0</b>



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Most Wired Digitalisierungsgrad Messung Zertifikats Niveau	Einstufung	Auszeichnung
Niveau 10	90,1-100 Prozentpunkte	Superior Performance Excellence Award
Niveau 9	80,1-90 Prozentpunkte	Performance Excellence Award
Niveau 8	70,1-80 Prozentpunkte	Quality Award
Niveau 7	60,1-70 Prozentpunkte	Special Recognition
Niveau 6	50,1-60 Prozentpunkte	Most Wired Participant
Niveau 5	40,1-50 Prozentpunkte	Most Wired Participant
Niveau 4	30,1-40 Prozentpunkte	Most Wired Participant
Niveau 3	20,1-30 Prozentpunkte	Most Wired Participant
Niveau 2	10-20 Prozentpunkte	Most Wired Participant
Niveau 1	0-10 Prozentpunkte	Most Wired Participant

### Das Niveau der Most Wired Auszeichnungen:

- Die Ergebnisse ermöglichen es den teilnehmenden Kliniken, ihren aktuellen Digitalisierungsgrad zu messen und die erzielten Ergebnisse untereinander zu vergleichen. Most Wired ist ein Katalysator für die Einführung von IT bzw. der Realisierung der Chancen der digitalen Transformation.
- Der Standard entwickelt sich kontinuierlich weiter, so dass Kliniken einen echten Vergleich mit anderen Kliniken und dem definierten weltweiten Industriestandard durchführen können. Jede Klinik wird auf einem Niveau zertifiziert, das seinen jeweiligen Leistungen entspricht. Die Niveaus basieren ausschließlich auf einem Rohwert der Klinik und im ersten Schritte auch ohne Berücksichtigung, wie dieser Wert im Vergleich zu den Werten anderer Kliniken ausfällt.

# Most Wired Trends Report 2019

Presentation of  
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## Which Insights are Valuable for the German speaking countries?



CHiME  
Digital Health  
**most wired**<sup>®</sup>  
Survey



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# EHR Data Access and Integration

**EHR remote access at 100%;  
Other areas are lagging.**

## Data/Functions Clinicians Can Access Remotely from Outside the Hospital Network (n=496)

● 2018   ● 2019

Full EHR

99%  
100%

Full PACS/imaging data

98%  
98%

Patient communication

86%  
92%

Secure texting

72%  
63%

Secure messaging via HISP

73%  
74%

Virtual patient visits

60%  
71%

Secure messaging using non-HISP vehicle

59%  
62%

Alerts/notifications for chronic patients†

49%

Data from connected implants or RFID/RTLS received on smart devices\*

0%

100%

† Not measured in 2018 survey



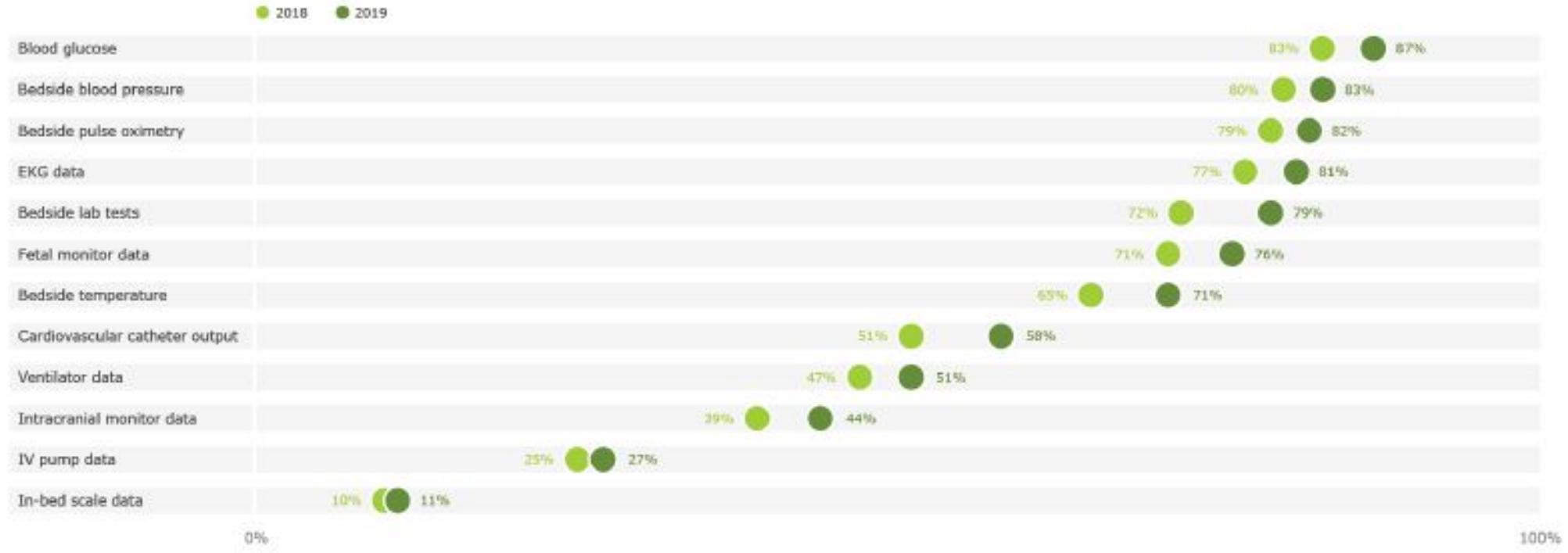


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### Information Sent Directly from Patient-Monitoring Equipment to the EHR

(n=496)





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## All data sources are being integrated at a higher rate than 2018.

**Types of Clinical Alerts Sent from an EHR-Integrated Surveillance System**

(n=496)

2018  
2019

Alerts to critical care units

58% 66%

Alerts to general medical-surgical units

56% 63%

Alerts to step-down units

51% 58%

Alert data tied to present-on-admission reporting

27% 33%

No surveillance system

29% 35%

0%

100%



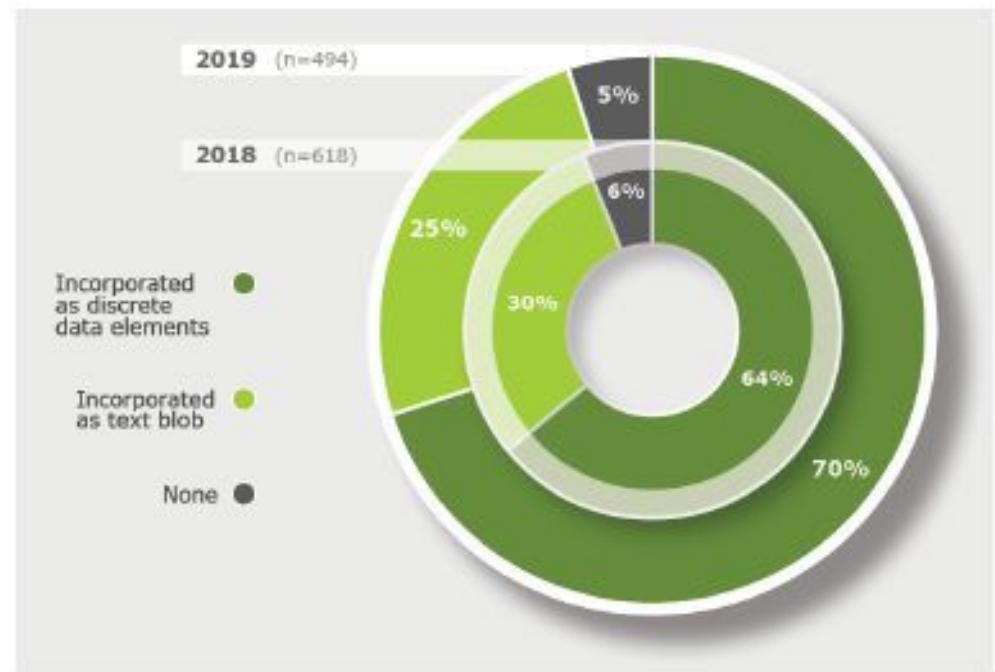


AHIME  
Association of Health Information Management Executives

# Marketing Moving to Discrete Integration of External Data

As a whole, the healthcare industry is shifting away from consuming external data as text blobs and moving toward directly integrating data discretely into the EHR.

Incorporation of CCDs and CCRs from Physician-Office EHRs





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## Which Insights are Less Valuable for the German speaking countries?



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Survey



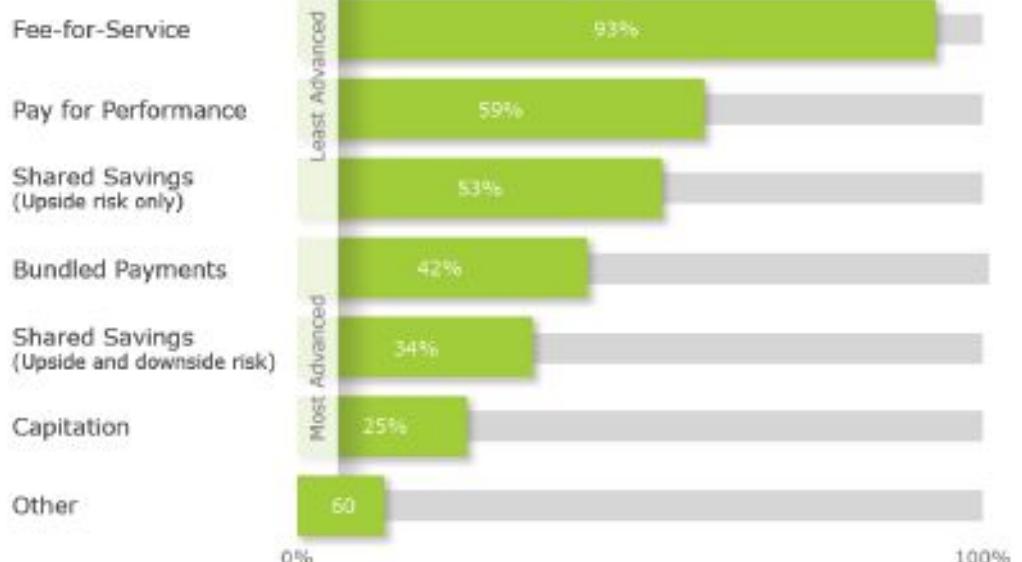
# Value-Based Care

**Most organizations use a mix of payment models.**

**93% of participating organizations still use fee-for-service in some way; most of the remaining 7% rely on other revenue streams.**

**Percentage of Organizations Participating in the Following Payment Models**

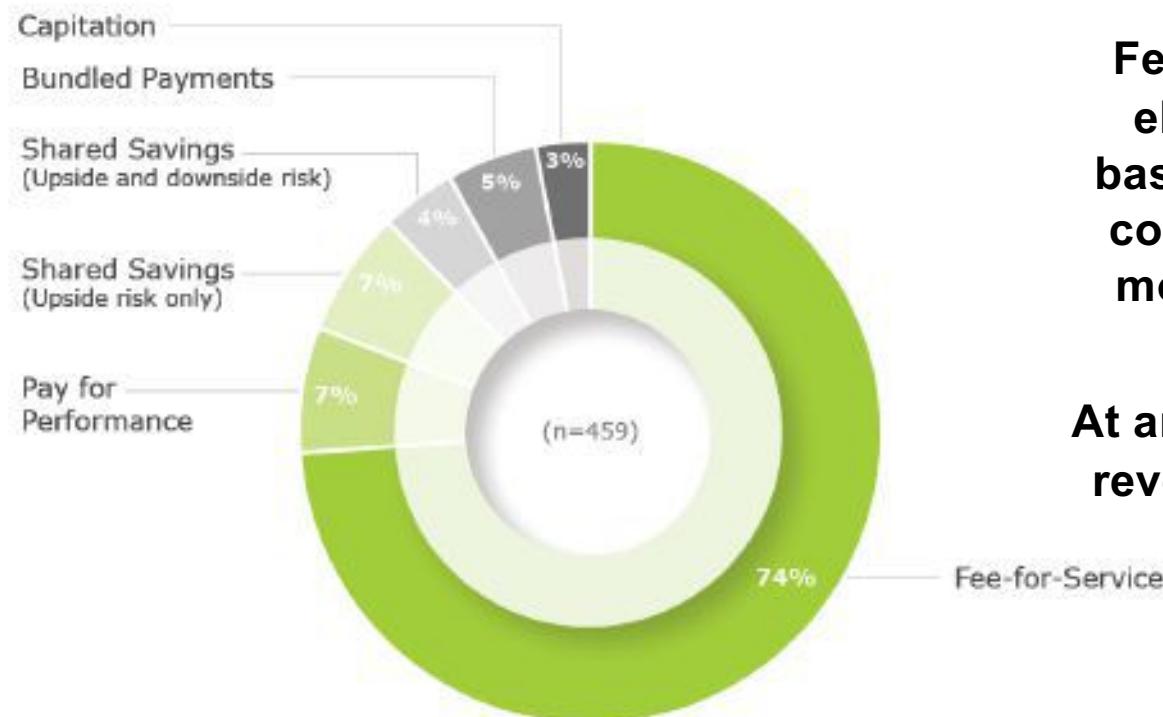
(n=459)





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## Average Percentage of Total Revenue



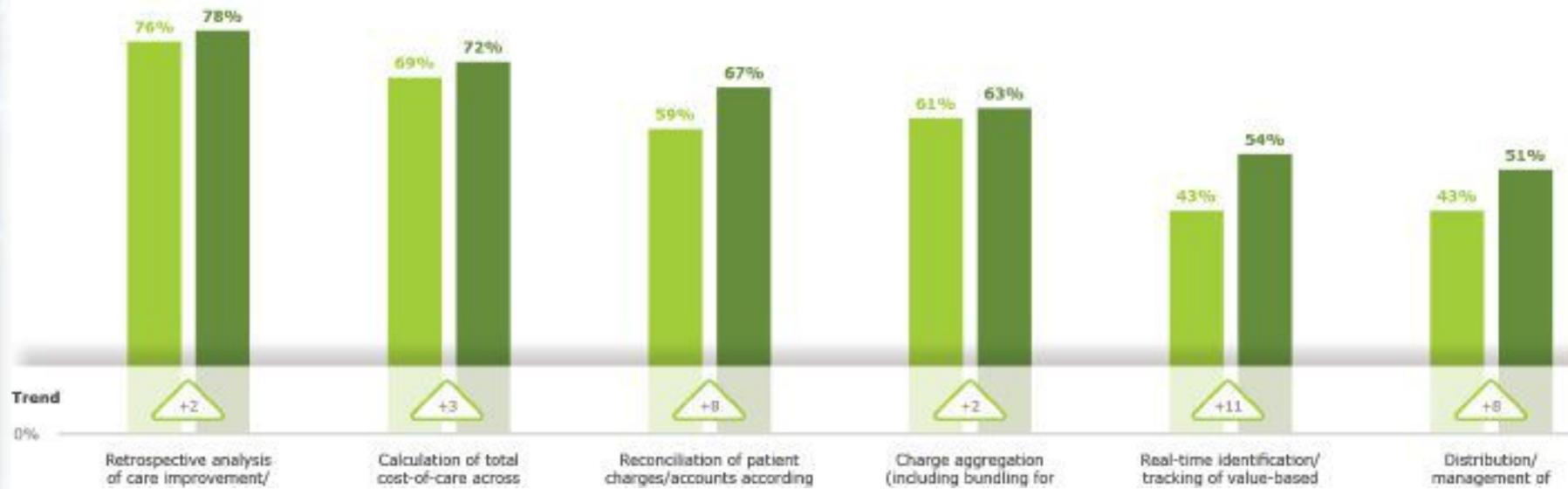
**Fee-for-service is unlikely to be eliminated entirely, but value-based payment models will likely continue to expand to comprise more of organizations' revenue streams.**

**At an industry level, only 26% of all revenue comes from value-based payment models.**



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## Adoption of Revenue Cycle and Contract Management Capabilities, 2018 vs. 2019



# Most Wired Report

What should be the Most Wired focus for the German  
Speaking Countries?

What are the „Results“ you want to achieve?  
What are the Key Domains & Questions for the Survey?



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# Catalog of Requirements (Anforderungs-/ Maßnahmenkatalog)

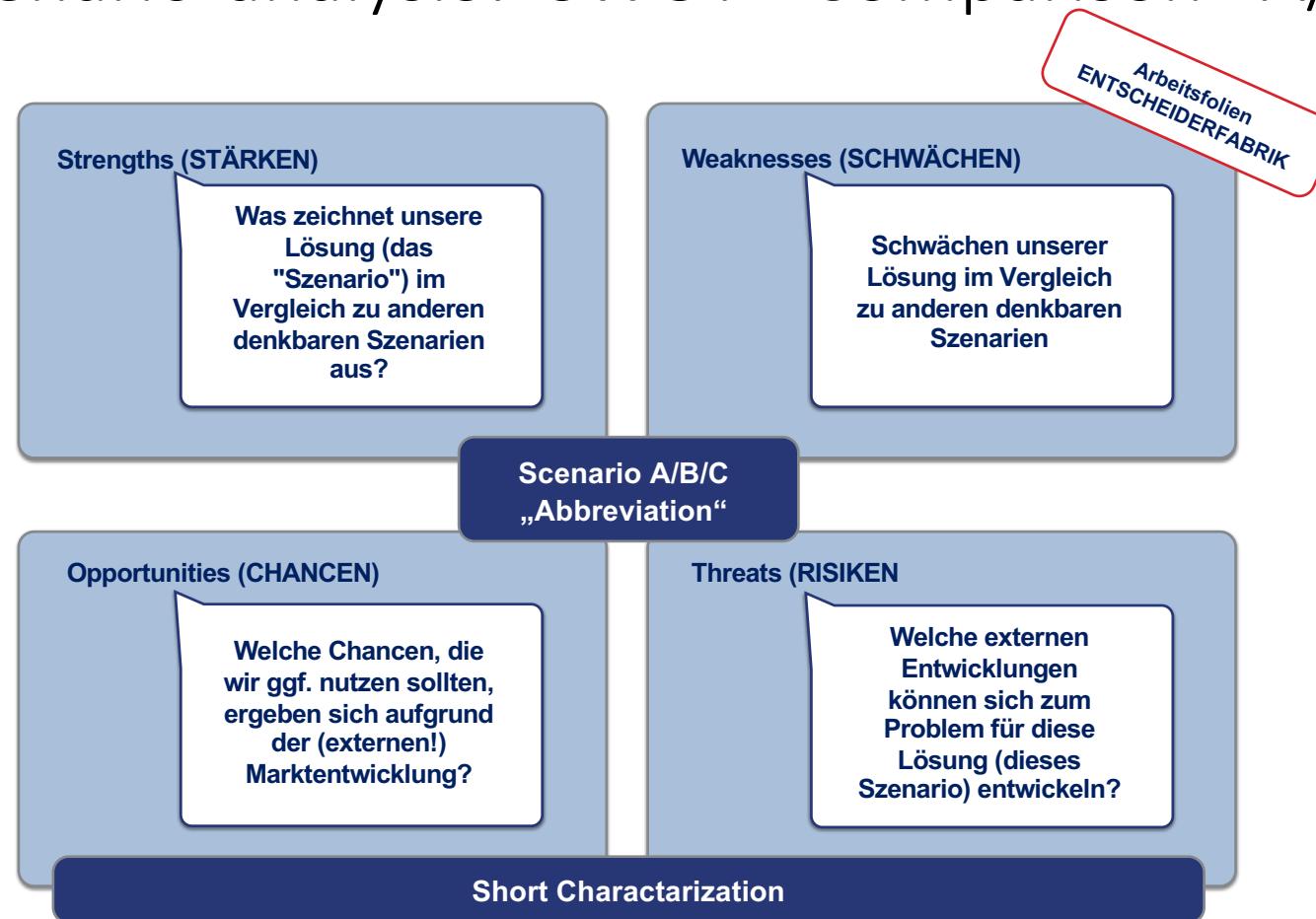
Pos.	TOP
1	
2	
3	
4	
5	
6	
7	
8	



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# Szenario-analysIS: SWOT - Comparison A/B/C



# Szenario-analysis: SWOT - Comparision A/B/C

## Strengths (STÄRKEN)

- ...
- ...
- ...

## Weaknesses (SCHWÄCHEN)

- ...
- ...
- ...

Arbeitsfolien  
**ENTSCHEIDERFABRIK**

## Opportunities (CHANCEN)

- ...
- ...
- ...

## Threats (RISIKEN)

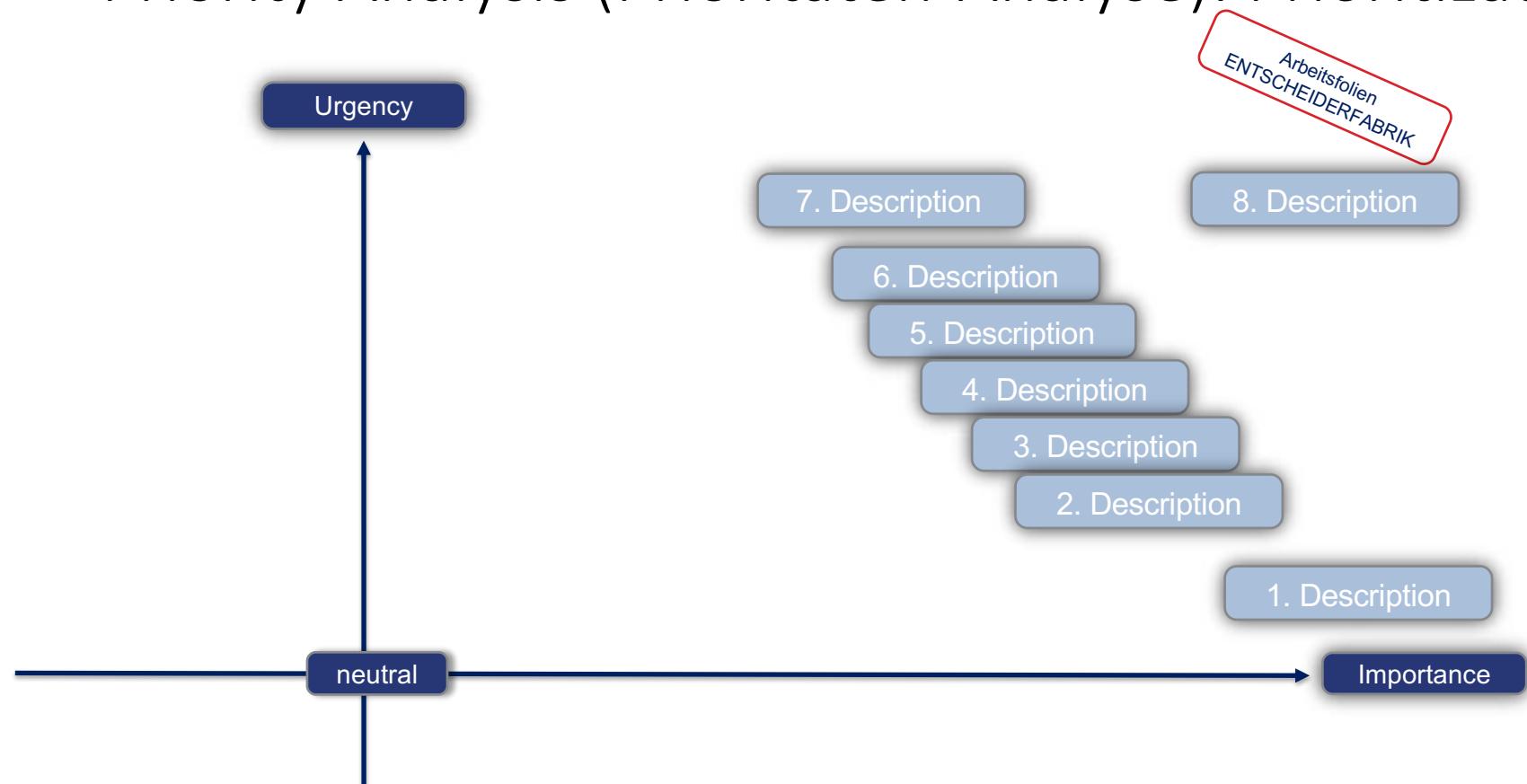
- ...
- ...
- ...



# Agenda

1	Challenges (Herausforderung)
2	Scope of work (Aufgabenstellung)
3	Catalog of Requirements (Anforderungs-/ Maßnahmenkatalog)
4	Scenario Analysis (Szenarien-Analyse)
5	<b>Priority Analysis (Prioritäten-Analyse)</b>
6	Summary (Zusammenfassung und Fazit)
7	Outlook (Ausblick)

# Priority Analysis (Prioritäten-Analyse): Prioritization





# Agenda

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# Summary (Zusammenfassung und Fazit)

Pos.	TOP
1	Value of the Solution
2	Internal Costs
3	External Costs
4	Decision memo for the Executive Board incl. Summary
5	
6	
7	
8	



# Agenda

1	Challenges (Herausforderung)
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# Outlook (Ausblick)

Pos.	TOP
1	Concept
2	Study Group and feasibility study - Hospital Community Hosp.Do.IT (Hospitalgemeinschaft Hosp.Do.IT)
3	Specification for the German Speech Community
4	Adaption plan for MostWired
5	Project Plan
6	
7	
8	



# Thank you for your attention (Danke für ihre Aufmerksamkeit)

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