Case Study

Disconnecting from Community Connect: How an Illinois Medical Center Established Its Own Epic EHR System

Background and Challenge

A large health system sold an Illinois medical center to private investors, allowing it to continue using the health system's Epic EHR platform via the Community Connect program. Only a year later, the health system prepared for a large merger, which meant the medical center needed to move to its own EHR system within a short timeframe. In only a few months, the medical center needed to:

• Map a path toward independence
• Go live just 90 days after receiving their initial Epic instance
• Ensure little to no disruption of patient care before, during, and after the changeover

Solution

Finding no precedent for disconnecting from Community Connect, the medical center turned to Tegria to help design, manage, and execute the challenging transition from start to finish, including:

• Strategy
• Project planning
• Implementation
• Training
• Cutover and go-live support
• Post-live support and maintenance

Given the extremely tight turnaround, the medical center elected to replicate their previous EHR instance (rather than build a new Epic system), then customize it after the transfer. By copying the original suite, the medical center avoided big changes for end users as well as the need to build its own workflows. With no time to research and price various options, they also chose to contract with all of their previous health system's third-party EHR suppliers, such as PACS for Radiology services, Sunquest for Lab, and Elsevier's Clinical Practice Model for inpatient documentation.

Execution

Project Planning
The project team first focused on developing a total cost of ownership (TCO) and implementation plan. Previously, their parent health system handled the cost, contracting, and integration with third parties as well as the IT costs and resources for maintaining, optimizing, and upgrading the EHR system.
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Our partner needed to transfer, customize, and maintain the Epic Enterprises Suite and more than 30 third party integrations, including devising a staffing plan for EHR application support. Many modules required outside suppliers and applications and/or needed to be integrated to other hospital systems, such as the radiology module connecting to the Apex image archive.

With time and budget constraints, planning required making tough decisions on what was critical versus nice to have. The team also identified major risks of the switchover and developed mitigation strategies to enable the medical center to go-live with confidence.

Implementation

The time crunch meant that the medical center began executing before the plan was fully developed. They relied on a core onsite team and remote application support to manage costs yet still meet key goals.

In a major technical lift, the medical center had to buy and install its own servers, other hardware, and software to transfer all the connections from their previous system to theirs, then run the system. Fortunately, a true partnership was forming simultaneously. Alongside our client, we:

- Coordinated the technical strategy and implementation with Epic
- Built new environment and modified data structures
- Configured and tested system before go-live
- Adapted workflows and processes
- Created and executed change management and operational readiness programs
- Trained current and new IT staff

Outcomes

Our partner went live with its own Epic EHR system by the transfer deadline, with minimal disruption to patients and the hospital's Epic users. Importantly, the revenue cycle returned to its baseline within Epic’s expected timeframe following a traditional go-live.

Such a massive undertaking would normally take 9-12 months to plan and execute, with up to three months of post-live support required.

Although the original EHR platform was built for an organization with multiple hospitals, there was no time to make any major adjustments to better accommodate a single medical center before the conversion. The team successfully implemented its plan to optimize the system, including outsourcing some functions, establishing governance structures, and working through its prioritization efforts.