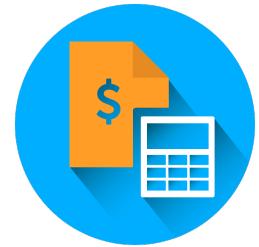


Key Process Analysis (KPA)

Combines clinical and financial data to highlight the best opportunities for improvement and cost reduction

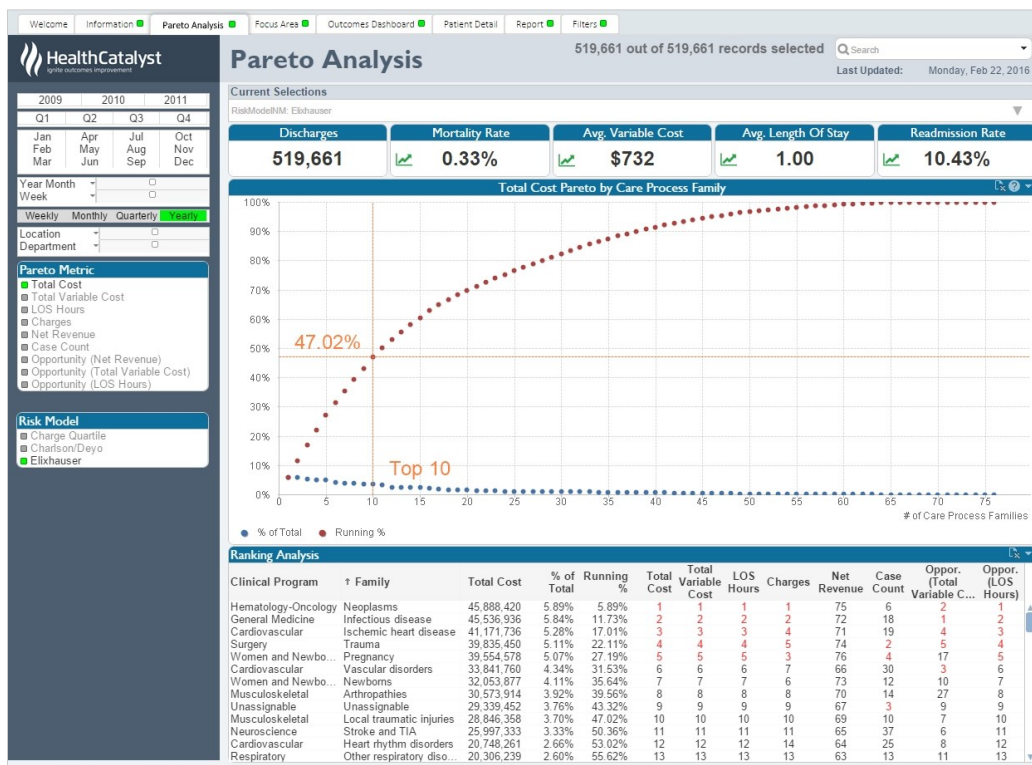


Type: Analytics Accelerator

ID: 1483

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The **KPA** analytics accelerator uses the “80/20 rule” to show the relative size of your clinical care processes and performs variation analysis to reveal meaningful differences within each process. Leveraging both clinical and financial data, it highlights the best opportunities for quality improvement and cost reduction and guides an organization’s plans for technology and services to support improvement initiatives.



The Key Process Analysis (KPA) tool highlights the clinical care processes that make up the majority of the services you provide to patients; organizations are likely to find their best improvement opportunities within this group.

The problem

One of the fundamental ideas of quality improvement theory is to identify key work processes, then organize around them. Many healthcare organizations, however, struggle to create meaningful views of their core processes and decide which to prioritize. **Given many opportunities for improvement, where should they start?** The Pareto Principle (or the “80/20 rule”) suggests that 80% of cost, waste, and variation are accounted for by 20% of clinical processes. Teams need to compare populations to prioritize and focus their improvement efforts on groups with the greatest need and cost benefit. However, EHR reports don’t compare cost, utilization, variation, and so on, across populations—and while analysts can develop comparison reports, the work is laborious.

Intended Users

- Organizational improvement leadership: Chief Medical Officer, Chief Quality Officer, others
- Clinical and operations directors
- Improvement teams

Potential data sources

- Finance/Costing
- Billing
- EMR - Clinical

Key measures

The following measures are available at both a **total volume** level (based count of cases) and a **per-case** basis:

- Charges
- Cost (total and variable direct)
- Net revenue
- Length of stay
- Mortality
- Readmission

Our approach

The **KPA** analytics accelerator delivers powerful insight into the relative size of clinical care processes, the variation that exists within them, and the potential impact of improving care delivery. The KPA accelerator is an essential tool for prioritizing improvement initiatives and deepening leaders' understanding of the drivers of organizational performance.

Benefits and features

- **Gain a comprehensive, clinically meaningful view of your business**. The KPA accelerator leverages Health Catalyst's Clinical Hierarchy, which organizes your data by the work that clinicians do. The application is able to show your total business (e.g., your cardiology, obstetric, or oncology business) as it spans inpatient and outpatient settings and can highlight variation within care processes at a granularity that makes sense to clinicians.
- **Quickly identify and prioritize improvement opportunities around clinical care processes**. The KPA accelerator highlights variation in cost and clinical outcomes within a care process. For example, it can reveal variation in care across providers delivering that care and can quantify the opportunity associated with care variation. The application also shows total time spent caring for patients and leverages financial metrics to identify resource consumption.
- **Filter and explore the data to better understand opportunities and guide improvement intervention**. KPA lets you apply risk adjustment using either APR-DRG severity illness, HHS-HCC, or Charlson/Deyo risk index scores. Users are able to look at variation in different metrics of cost, charges, and length of stay—and to drill into different sites and provider variation for a selected care process.

Use cases

The organization's **improvement leadership team** uses the app to look across their clinical care processes: where are their biggest opportunities to improve? Using the KPA accelerator, the team is able to identify the care processes that are consuming the most resources—and then drill down to analyze variation within those processes. Based on what they see in the application, they decide that heart failure is a promising area for efforts to reduce cost and clinical variation and assemble a cardiology group-led team to begin improvement work aimed at standardizing care around best practices. Within 18 months, the team has implemented best-practice interventions (medication reconciliation, post-discharge follow-up, teach-back patient education) that improve care transition and result in dramatic reduction in heart failure readmissions.

Success stories

For examples of how customers have used Health Catalyst products and services to improve outcomes, visit <https://www.healthcatalyst.com/knowledge-center/success-stories/>

Contact us

For more information on how Health Catalyst products and services can help your organization, please contact us:

- Reach out to your sales representative
- Call us at (855) 309-6800
- Email us at info@healthcatalyst.com