Fielding requests for patient records would seem a simple, straightforward task. But health information managers at hospitals and health systems have long faced a dilemma with release of information (ROI) processing: in-house versus outsourced.

Beyond retrieving records efficiently, hospitals and health systems that handle ROI requests in-house must also invoice, take status inquiries over the phone, and master other non-technical tasks. Because fulfillment isn’t their niche, these organizations tend to collect fewer of the fees requestors should pay for the ROI. On the other hand, some hospitals and health systems fully outsource ROI processing. This way, they lose much of the hassle of gathering records for patients, attorneys, insurance companies, record retrieval services, physicians, the business office, government agencies and others. However, they also lose both control of the service and all associated revenue.

In recent years, the business need has converged with advances in information technology to create a better solution, the shared services ROI processing model. Using this approach, hospitals and health systems can work efficiently, maintain control and retain more revenues.

With ROI processing using a shared services model, providers manage the “front-end” services that HIM departments excel at. And they let an outside vendor handle “back-end” services that are tedious, complex and unfamiliar.

Doing in-house what they do best
Many of the front-end steps of the ROI process represent the core competencies of the health information management staff. Thus, they can maintain high service levels by receiving initial requests by mail, researching and validating the requests, locating relevant records and determining what information to release.

By keeping this function internal, hospitals and health systems can easily integrate the process with existing electronic medical records (EMR) and document imaging systems to leverage their IT investments. Though they typically don’t address back-end functions such as ROI fee invoicing, fulfillment or monitoring of state regulations and protocols, many EMR systems include modules designed to enhance data retrieval and ROI status tracking.

As seen in
Healthcare Informatics
The Business of Healthcare Information Technology

By Dan Heist, Chairman, MRO Corp.
The shared services model also allows hospitals and health systems to maintain direct control of the release process, a key advantage considering the recent emphasis on protecting sensitive patient information.

**Outsourcing the rest**

Inherently, however, some steps in the ROI process are not well-suited to Health Information Management Departments. To manage ROI requests properly, someone must understand how their state regulates ROI fees, which change frequently, and how to apply these fees to specific types of records or categories of requesters. Someone must calculate invoices and confirm payment prior to release. Someone must verify the information and apply postage before mailing pages or CDs. Someone must field telephone status inquiries from requesting parties and their agents.

Generating the requested document is just one part of this often repetitive, convoluted process for hospitals and health systems. Some retrieval services, which represent law firms, insurance companies, other high-volume requestors, place both confirmation and a status inquiry phone call as standard operating procedure. And for certain requestors, providers are instructed not to pre-bill. Unfortunately, most health information management departments are simply not set up to operate a customer service call center or monitor state regulations.

Using the shared services ROI processing model, hospitals and health systems can outsource these headaches without exporting their revenue and relinquishing control.

**The best of both worlds for the bottom line**

When hospitals and health systems that previously handled requests in house switch to the shared services model, they rarely see revenues decline as they do when ROI requests are fully outsourced. For several reasons, ROI revenue is more likely to hold steady or increase.

First, it’s more effective. The shared services model utilizes a secure web-based back-office workflow. So invoicing is handled by specialized, dedicated systems that are more thorough and more accurate in identifying and assigning ROI fees. At one of our hospitals, ROI revenues increased by 24 percent - a significant impact to that department’s budget.

Second, it’s more efficient. While a hospital or health system maintains control of front-end functions, it outsources printing, mailing, collections and call center operations. An external organization with knowledgeable people and electronic interfaces designed for the task can leverage economies of scale and still offer the highest levels of service.

Third, it leads to additional savings. Hospital and health system staffs focus more on productive tasks. Less time is consumed by telephone inquiries and paperwork because both the administrative and production tasks are now outsourced. These are hard cost savings.

Increasingly, as cost containment pressures mount, the shared services model will continue to evolve to further streamline the ROI request process. Hospitals and health systems will adopt the model because they can retain control over the parts of the process they do best. Through Internet-based automation and collaboration, they outsource the tedious, complex tasks. And most importantly, the ROI process can improve the organization’s bottom line.