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Re-Thinking Security and Trust Integration for the Cloud Era

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**SAASCON
2010**



Third largest and fastest growing national physician practice management company focused on Emergency and Hospital medicine

- **Headquarter in Lafayette, LA**
- **9 Regional offices across the country**
- **Support global operations**
- **750 full-time employees**
- **~155 Emergency Department contracts**
- **2,400 Emergency and Hospital Medicine providers**
- **Provide care for 3 million patients annually**
- **Domestic and International operations**



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Drivers for Cloud Adoption

“Utilization of cloud computing was not driven by the BUZZ of the cloud, it was driven exclusively by business needs. There was never a “cloud strategy.”

- **15-30% annual growth rate**
- **Ability to scale**
- **Business continuity (Hurricanes)**
- **Dynamically changing healthcare environment**
- **Need to deliver more, faster, at less expense**
- **Advanced work flow needed**

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Drivers for Integration & SSO

“One of Schumacher Group’s guiding principles is to be the most user friendly emergency medicine management companies in the country”

- **SSO reduces security risk**
 - Less password resets
 - Eliminates “sticky note” passwords
 - Increases productivity of users
- **Integration improves data quality**
- **Integration forces change management conversations**
- **Integration increases efficiency of users**

Schumacher Data Integration

< 6 Months

Past

- Data aggregation
- Analysis for Internal Information
- Timeliness of Data: 2 to 6 months old
- Reporting Solutions

3 - 6 Months

Current

- Repurpose data and present to providers and stakeholders via web
- Timeline: 2 days to 30 days max
- Actionable data, changing behavior

3 - 12 Months

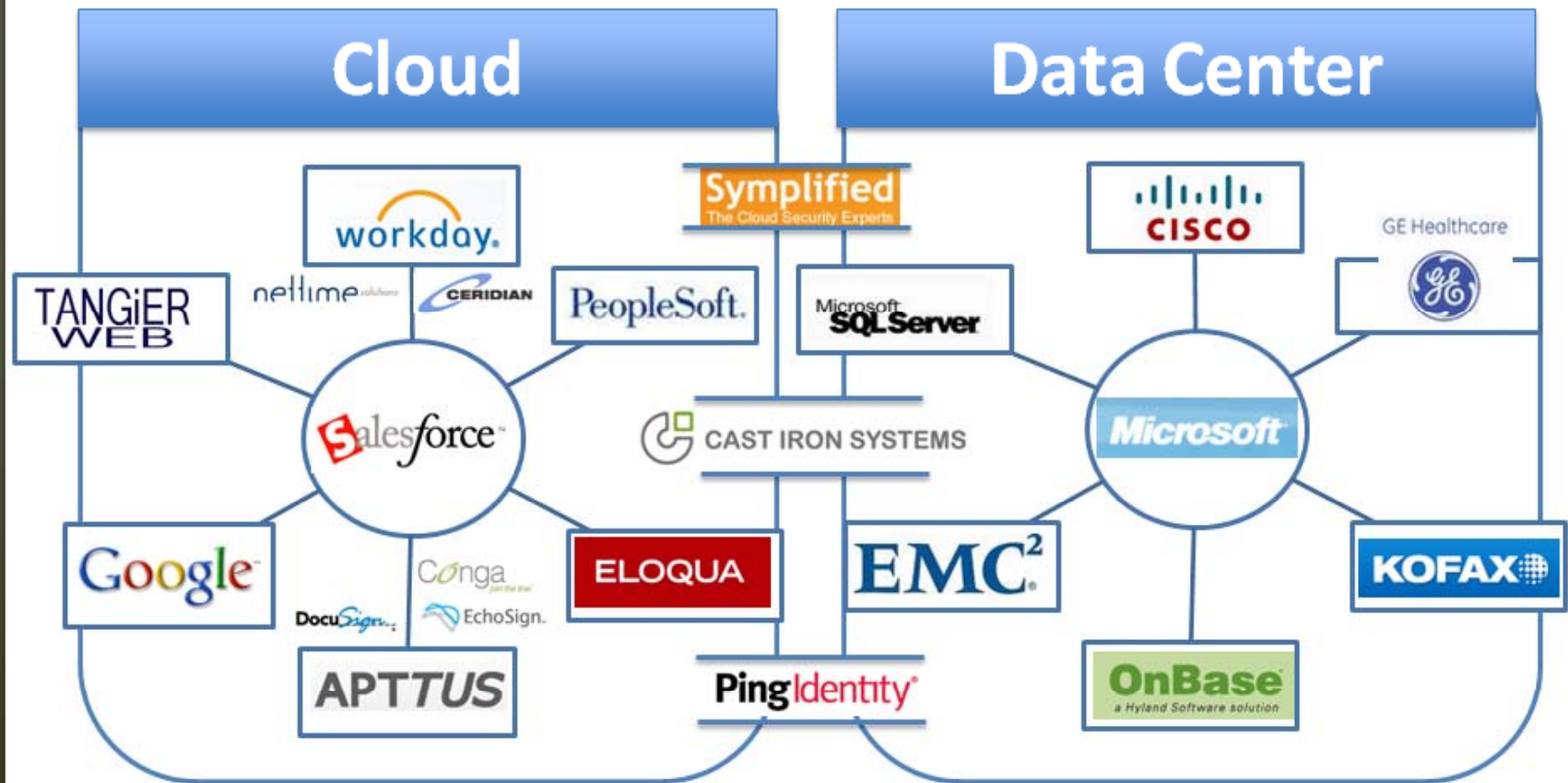
Future

- Customize
- Real-time data and chart management
- Individualized provider information
- Larger comparative data sets
- Maintain focus on actionable and meaningful data

Enterprise Architecture

Keys to success:

- Think as an Innovator
- Leverage what you know
- Apply the right tool to the job



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Medical Provider Portal

The screenshot shows the Schumacher Group Medical Provider Portal. The header includes the Schumacher Group logo and navigation links: HOME, MY PROFILE, FACILITIES, EARNINGS, MAILBOX (3), and LOGOUT. Below the header is a navigation bar with links: ADVOCACY, ANNOUNCEMENTS, EDUCATION, DOCUMENT LIBRARY, MY REPORTS, and ASK A QUESTION. The main content area is divided into several sections:

- My Action Center:** Alerts and Documentation. It contains three items:
 - You have five (5) deficient charts:** (Click link to complete and sign electronically.)
 - Your ACLS expires in 60 days:** (Click link for easy online renewal.)
 - Two (2) open shifts available:** (Click to view and/or claim.)
- My Key Metrics:** A table comparing Provider and Facility metrics:

| Metric | Provider | Facility |
|-----------------------|----------|----------|
| RRI/patient | 0.00 | 0.25 |
| Total Length of Stay | 0 | 0 |
| Door to Provider Time | 0 | 4 |
| Critical Care % | 0 | 1 |
| | 0 | 0 |
- My Upcoming Shifts:** A calendar view for Oct 2009 and Nov 2009. Below the calendar is a table of shifts:

| Shift Location | Shift Date |
|-----------------------------------|-------------------|
| Abilene Regional Medical Center | 10/19 6:00A-6:00P |
| Abilene Regional Medical Center | 10/20 6:00A-6:00P |
| Brownwood Regional Medical Center | 10/21 6:00A-6:00P |
| Brownwood Regional Medical Center | 10/25 6:00A-6:00P |
| Abilene Regional Medical Center | 10/26 6:00A-6:00P |
| Brownwood Regional Medical Center | 10/30 6:00A-6:00P |
- Announcements:** A banner for "BANNER AREA" and a message from FDA/CDER/Division of Drug Information (DDI) dated October 02, 2009, regarding potential dosing errors with Tansu (sulfamethoxazole).
- My Resources:** Document Library, Epocrates, Up-to-date, SG Documents, Facility Documents.

Exists to:

- Put tools and information at provider's fingertips 24/7
- reduce hassles and streamline communications for providers
- Allow them to focus 100% on patient care

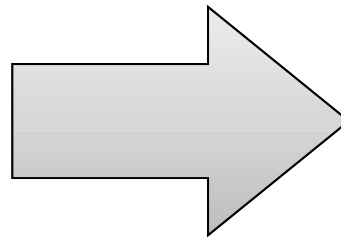
Features and content:

- Take action on important tasks
- Mailbox; Collaborate with peers
- Gain free CME and access quick medical resources
- Receive important alerts on expiring credentials and clinical documentation deficiencies
- View your key performance metrics compared to those of your peers
- Sign in and out for shifts and manage work schedule
- Weigh in on federal and state legislature with the click of a mouse



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Enter your username and password

[New User?](#) | [Forgot Password?](#)

SCHUMACHER GROUP Provider Portal

Welcome, Dr. Schumacher

HOME MY PROFILE FACILITIES EARNINGS MAILBOX (3) LOGOUT

ADVOCACY ANNOUNCEMENTS EDUCATION DOCUMENT LIBRARY MY REPORTS ASK A QUESTION

My Action Center

Alerts Documentation

- You have five (5) deficient charts**
(Click link to complete and sign electronically.)
- Your ACLS expires in 60 days**
(Click link for easy online renewal.)
- Two (2) open shifts available**
(Click to view and/or claim.)

My Key Metrics

| Metric | Provider | Facility |
|-----------------------|----------|----------|
| RN Liberate | 0.00 | 0.25 |
| Total Length of Stay | 0 | 0 |
| Door to Provider Time | 0 | 4 |
| Critical Care % | 0 | 1 |
| | 0 | 0 |

My Resources

- Document Library
- Epicorates
- Up-to-date
- 35 Documents
- Facility Documents

My Upcoming Shifts

Shifts & Schedule

| Oct 2009 | | | | | | | Nov 2009 | | | | | | |
|----------|----|----|----|----|----|----|----------|----|----|----|----|----|----|
| Su | Mo | Tu | We | Th | Fr | Sa | Su | Mo | Tu | We | Th | Fr | Sa |
| | | | | | | | | | | | | | |
| 6 | 7 | 8 | 9 | 10 | 11 | 12 | 6 | 7 | 8 | 9 | 10 | 11 | 12 |
| 13 | 14 | 15 | 16 | 17 | 18 | 19 | 13 | 14 | 15 | 16 | 17 | 18 | 19 |
| 20 | 21 | 22 | 23 | 24 | 25 | 26 | 20 | 21 | 22 | 23 | 24 | 25 | 26 |
| 27 | 28 | 29 | 30 | 31 | | | 27 | 28 | 29 | 30 | 31 | | |

* Please note that dates are subject to change

Shift Location

| Shift Location | Shift Date: |
|-----------------------------------|-------------------|
| Abilene Regional Medical Center | 10/19 6:00A-4:00P |
| Abilene Regional Medical Center | 10/20 6:00A-4:00P |
| Brownwood Regional Medical Center | 10/21 6:00A-4:00P |
| Brownwood Regional Medical Center | 10/25 6:00A-4:00P |
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Announcements

BANNER AREA

Schumacher Group Hosts MLA Reception at ACEP

Beaun, MA - October 13, 2009 - Schumacher Group's Medical Leadership Academy (MLA) hosted its second annual reception on Tuesday, October 6, 2009 at ACEP's annual Scientific Assembly in Boston, MA.

Message from FDA/CDE/Division of Drug Information (DDI):

October 02, 2009 - According to the US Food and Drug Administration, prescribers and pharmacists should be alert for potential dosing errors with Tanafin (conbravine) for Oral Suspension. U.S. health care providers usually write prescriptions for liquid medicines in milliliters (mL) or teaspoons, while Tanafin is dosed in milligrams (mg).

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1-800-493-9698

1. Provider identity stored in CRM solution
2. Lookup is performed by Symplified to verify account
3. Credentials are verified enabling provider to view Portal & Google apps
4. Same credentials are utilized to pull data through firewall
5. Result is a gateway page which presents provider a snapshot of areas to explore

GOOGLE ENTERPRISE

- 1) Enables provider to see they have new email
- 2) One click access to Inbox

RESULTS:

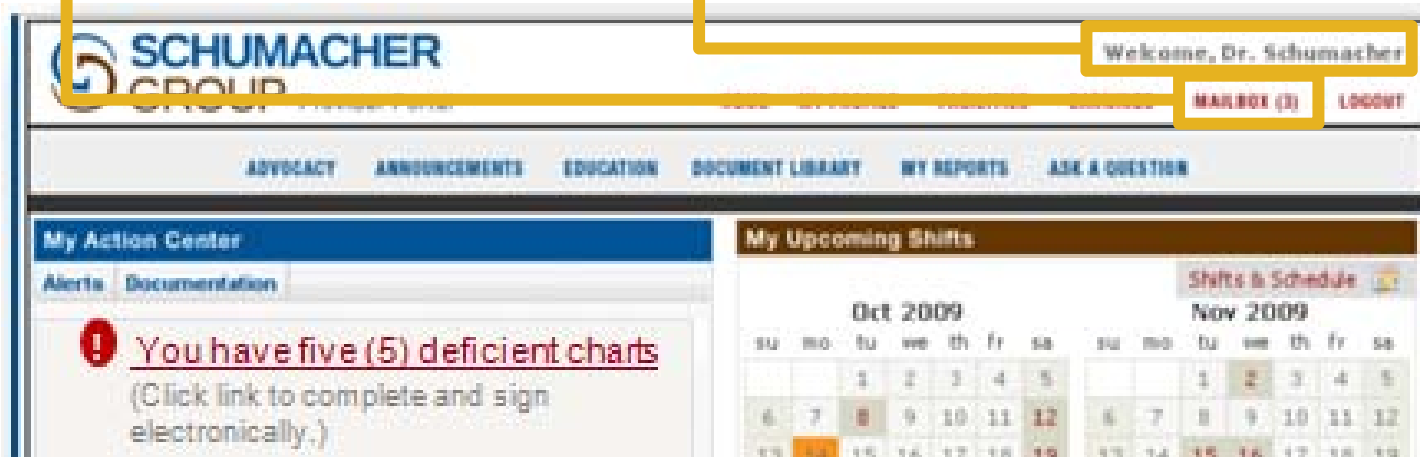
- 1) Ease of use for providers
- 2) Instant adoption

PERSONALIZATION

- 1) Integration solution calls Salesforce.com to personalize environment
- 2) Data is pushed and pulled in real-time via api calls

RESULTS:

- 1) Improved data quality
- 2) Forced automation and change management controls



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Welcome, Dr. Schumacher

MAILBOX (3) LOGOUT

ADVOCACY ANNOUNCEMENTS EDUCATION DOCUMENT LIBRARY MY REPORTS ASK A QUESTION

My Action Center

Alerts Documentation

! You have five (5) deficient charts
(Click link to complete and sign electronically.)

My Upcoming Shifts

Shifts & Schedule

| Oct 2009 | | | | | | | Nov 2009 | | | | | | |
|----------|----|----|----|----|----|----|----------|----|----|----|----|----|----|
| su | mo | tu | we | th | fr | sa | su | mo | tu | we | th | fr | sa |
| | | 1 | 2 | 3 | 4 | 5 | | | 1 | 2 | 3 | 4 | 5 |
| 6 | 7 | 8 | 9 | 10 | 11 | 12 | 6 | 7 | 8 | 9 | 10 | 11 | 12 |
| 13 | 14 | 15 | 16 | 17 | 18 | 19 | 13 | 14 | 15 | 16 | 17 | 18 | 19 |

ACTION CENTER

- 1) Integrated with on premise & cloud solutions
- 2) Sends messages which indicate action is required

RESULTS:

- 1) Providers have a hassle-free environment to manage complex scheduling and facility management
- 2) Provider adoption to on-line scheduling tripled in a 3 week period of time

REAL-TIME DATA

- 1) Integrated with on premise & cloud solutions
- 2) Providers have access to individual and team performance

RESULTS:

- 1) Providers behavior has changed since presenting data
- 2) Providers are asking to see data in different views
- 3) Quality of charting has improved.



WORK SCHEDULE

- 1) Integration with Tangier solution provides schedule at a glance
- 2) Drilling into Schedule is performed with SSO

RESULTS:

- 1) Providers have a hassle-free environment to manage complex scheduling and facility management
- 2) Provider adoption to on-line scheduling tripled in a 3 week period of time

COMMUNICATION CENTER

- 1) Integrated with on premise & cloud solutions
- 2) Keeps provider informed of corporate activity

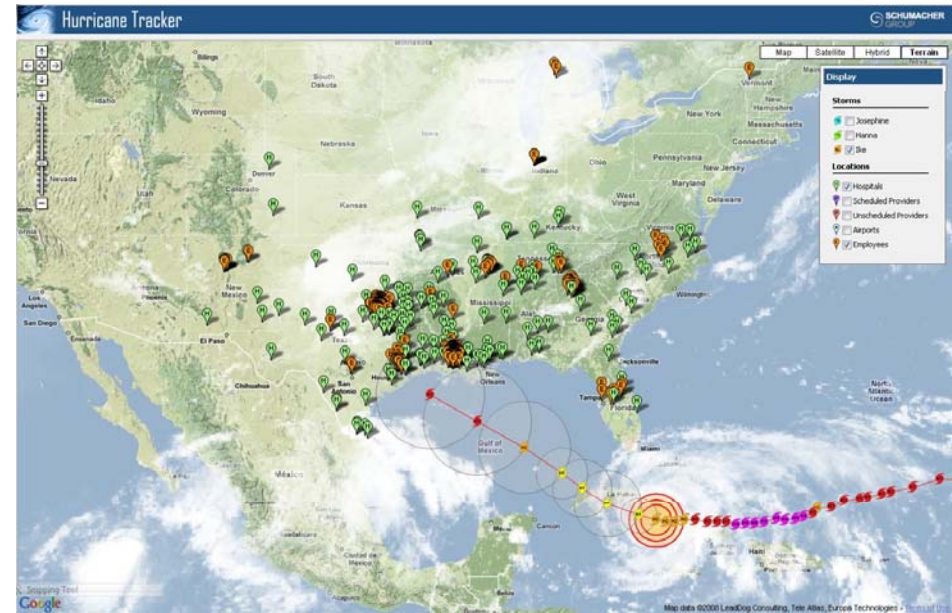
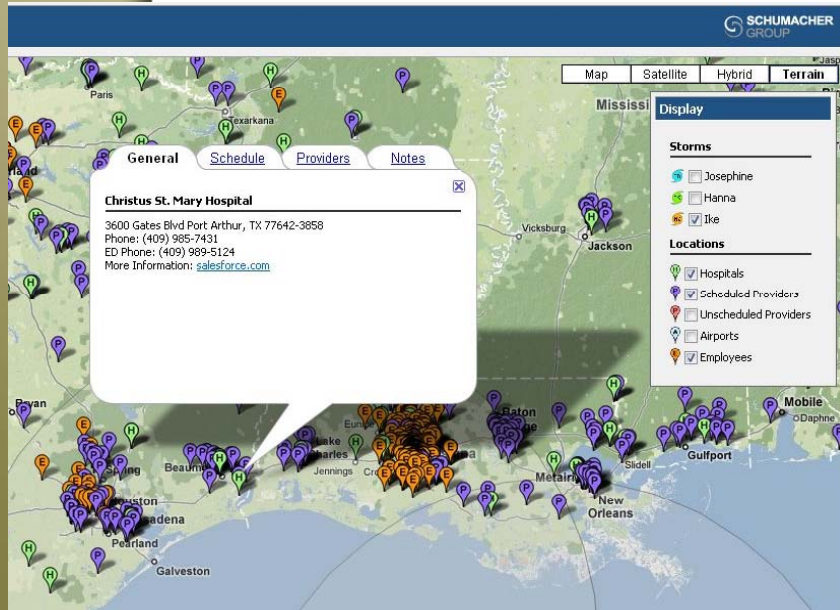
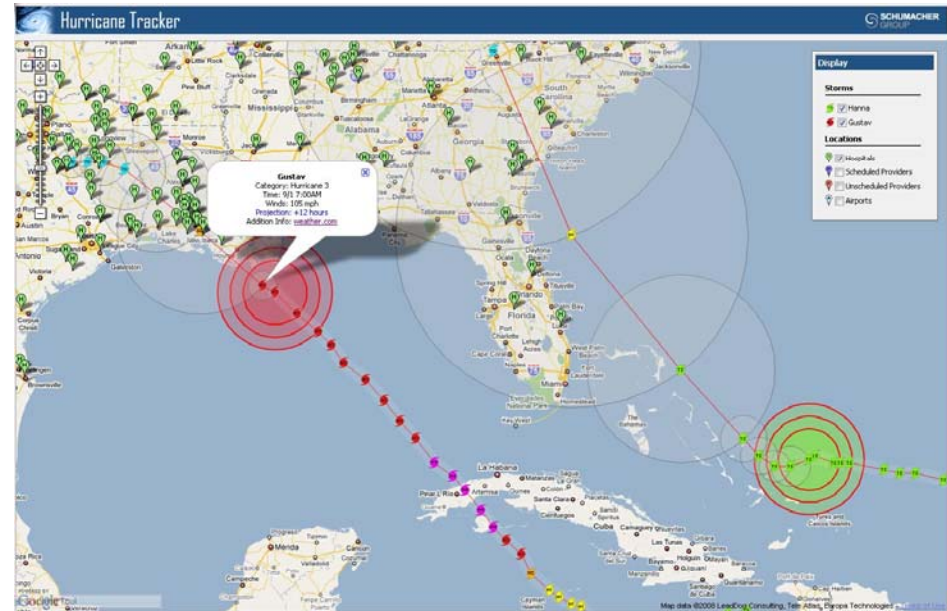
RESULTS:

- 1) Providers feel as though they are connected to Schumacher Group



Hurricane/H1N1 Tracker

- Google Mashup
- Salesforce.com
- Google
- Tangier
- National Weather Service
- CastIron used to push address data to Google for geocoding
- Utilize api's for real-time calls
- Utilize on premise databases



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How did we get where we are?

- Focused on the needs of the business
 - Job is to ensure “success” of users
- No formal “cloud” strategy
 - Felt second nature to deploy
 - No strategy to eliminate data center
- Hired experience “dot com” web application developers
 - Needed to think different
- Took an iterative approach
 - Started with 75 SFDC licenses and transitioned to ELA
- Instituted PMO best practices
 - Did not let them bog down deployment

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Why have we been successful

- Took risks when risks needed to be taken
- Mostly built out “net new”
- Formed solid partnerships with vendors (not just cloud)
- Built “change” into our culture
- Delivered on timelines and project expectations
- Embraced creative and innovative thinking
- Embraced workflow
- Powered through hurdles to make solutions work

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