

InterSystems Deploys Accelerators to Reduce Connection Time for Clinical Data Feeds by 60% and Counting

This briefing highlights how InterSystems is collaborating with diverse customer organizations to streamline the set-up of new data feeds to a high-performing longitudinal health record.

“HEALTHCARE PAYER CIOs AND EXECUTIVES ROUTINELY UNDERESTIMATE THE COMPLEXITIES OF CLINICAL DATA INTEGRATION INITIATIVES, LEADING TO SUBPAR BUSINESS OUTCOMES.”

Gartner¹

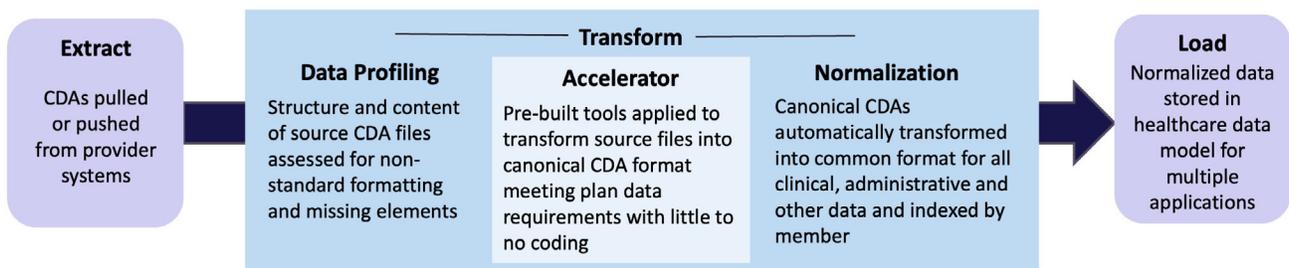
Industry Challenge

According to Gartner, health plan leaders are counting on the integration of clinical data “locked in provider’s electronic health records” to enable a host of needed improvements. Cited use cases include advances in clinical quality, care continuity, utilization management, and risk adjustment optimization. However, scaling clinical data integration remains “elusive” in large part due to the cost and time associated with integrating each additional data stream.¹ More precisely, plan-specific data requirements and proprietary formatting of CDA (Clinical Data Architecture) and HL7 v2 source files too often necessitate extensive data mapping and customized coding to normalize disparate data streams. So, InterSystems set out to rethink the process of onboarding clinical data feeds.

InterSystems Approach

At the heart of our success in meeting this challenge is a key insight: the universe of unique adaptations needed to integrate data feeds from provider Electronic Health Records (EHRs) into a normalized, member-centric longitudinal health record is far less than conventional wisdom suggests. Up to 80% of what may seem like customized requirements repeat among the wide array of health plans and systems we serve. Acting on this insight, we have developed a living library of transformation accelerators, pre-coded tools for transforming data from specific EHR configurations into normalized data. Our accelerator library currently covers nearly 50 specific configurations, including profiles from the top ten US EHRs, and continues to grow. We add a profile each time we support a novel connection.

Data Transformation Pathway with CDA Accelerator



¹ Gartner, “How Clinical Data Integration Improves U.S. Healthcare Payer Interoperability,” 2024.

Impact

Using these accelerators, InterSystems has **reduced connection times** by up to **60%** for CDA interfaces and **50%** for HL7 v2 interfaces and are on pace to net further savings in the coming year. As noted above, we project that up to **80%** of what may seem like one-off requirements are shared among other health plans and systems and continue to expand the breadth and depth of our accelerators to fully unlock these savings.

Additionally, our accelerators have dramatically simplified InterSystems upgrades. Our accelerators effectively split the data transformation process into two components. Source data is transformed into canonical formats via the accelerators and then normalized with other pre-built tools and stored in our longitudinal health record or an edge repository for multiple applications. Consequently, upgrades trigger little need for recoding to preserve customer-specific adjustments because the canonical midpoint continues to reflect them.

About InterSystems

For decades we have partnered with health plans and other payers to design and implement cost-effective solutions for connecting disparate data sources to enhance operations, increase care continuity, reduce waste, and address data-related regulatory mandates. Today, more than two-thirds of the US population benefits from our creative data solutions. To learn more about our solutions and how we might help your organization, visit InterSystems.com/HealthShare

