



Surescripts Interoperability Solutions (Direct Provider Customers) 2021

Improving Patient Outcomes Using Integrated Communication Technology



Why This Spotlight?

For many years, Surescripts has been well known in the industry for their work with ePrescribing. It is not as well known that they also have capabilities to help with other interoperability challenges. This report shares customer feedback on Surescripts' Record Locator & Exchange and Clinical Direct Messaging solutions, along with limited insights on adoption of the newer Care Event Notifications solution. Customers interviewed for this report are provider organizations using Epic's EMR and working directly with Surescripts (other EMR vendors act as an intermediary between their customers and Surescripts).

Surescripts Interoperability Solutions (Direct Provider Customers): Improving Patient Outcomes Using Integrated Communication Technology

What Do Surescripts' Interoperability Solutions Do?
(A Customer Explains)

"Surescripts' Record Locator & Exchange gives us the ability to automatically search Surescripts' network to identify any records for patients that might be housed in other locations. When it comes to Clinical Direct Messaging, we use Surescripts as our provider of health information services. We have been using Surescripts' solutions for several years now, and we have been really happy with them." —Analyst/coordinator

Bottom Line

Most respondents (note that these are Epic customers who interact directly with Surescripts) are satisfied with Clinical Direct Messaging and Record Locator & Exchange, and most would buy the systems again. Customers report the solutions meet their needs and advance their integration capabilities. Dissatisfaction is generally driven by functionality gaps, shortcomings in training, and general uncertainty about the solution's practical value in finding unique records.

Key Competitors (as reported by Surescripts)

Availity, Bamboo Health, Collective Medical, CommonWell Health Alliance, Redox

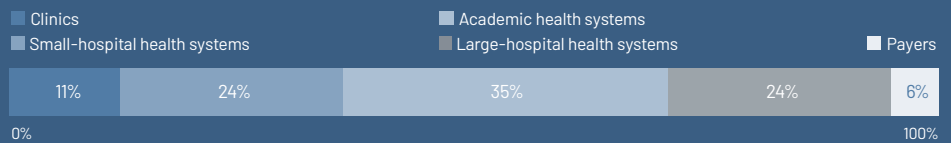
Number of Customers Interviewed by KLAS

19 individuals from 17 unique organizations (out of 154 provided by Surescripts)

Top Reasons Selected

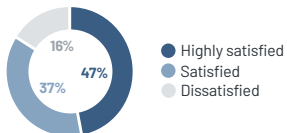
Large market share, existing relationship (with Surescripts via another solution, or with EMR vendor who recommended Surescripts), integration capabilities

Survey Respondents—by Organization Type (n=17)



Surescripts Customer Experience: An Initial Look

Overall Customer Satisfaction (n=19)



Time to See Outcomes (n=17)



Outcomes Expected by Customers

- Achieved
- Pending
- Not achieved
- Unexpected outcome

- Increased productivity with less paper
- Record Locator & Exchange**
- Access to records outside of current EMR
- Access to records that wouldn't have been otherwise found
- Clinical Direct Messaging**
- Faster and more accurate information exchange
- Expanded information exchange network

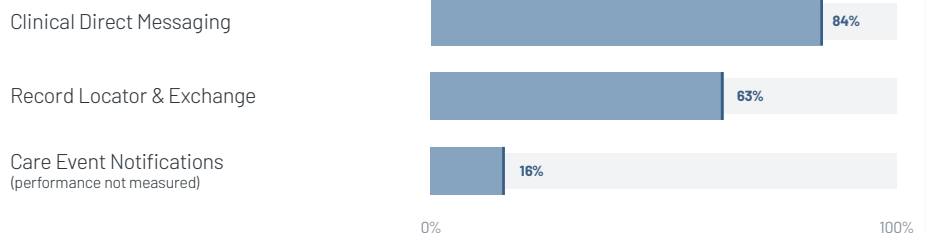
Key Performance Indicators (1-9 scale)

Supports integration goals B+ (n=17)	Product has needed functionality B- (n=19)	Executive involvement B (n=18)	Likely to recommend A (n=19)	Would you buy again? (n=18) 89% Yes, 11% No
---	---	---	---	--

Grading scale				
A+ = 8.55-9.0	B+ = 7.65-7.91	C+ = 6.75-7.01	D+ = 5.85-6.11	F = <5.22
A = 8.19-8.54	B = 7.29-7.64	C = 6.39-6.74	D = 5.49-5.84	
A- = 7.92-8.18	B- = 7.02-7.28	C- = 6.12-6.38	D- = 5.22-5.48	

Adoption of Key Functionality

Percentage of interviewed customers using functionality (n=19)



Strengths

Scalability and convenience



"We can accept more messages than we could if we used a smaller player. It means we don't have to repeatedly renegotiate how we talk to other health systems. That convenience really outweighs the minor, rare inconveniences of the system. Surescripts is comfortable with scale, and they are already a major player with active clients on most well-known EMR platforms." —IT analyst

Reliable customer support

"Surescripts communicates regularly. If I have a question, I can sometimes just reply to an email, and they will respond. I have never had to call Surescripts. I just submit tickets, and they email me. The process is smooth." —Analyst

Supports interoperability efforts

"The product is doing a good job of taking what we have and are trying to achieve with integration. It is a good option. Surescripts is at the forefront of making sure integration technology is being used. They are contributing to us moving forward because they are providing what is needed for integration." —Analyst

Opportunities

Some concerns over lack of training during and after implementation of Record Locator & Exchange



"The vendor leaves it to the healthcare system to deploy and implement the products and doesn't offer enough support and best practices. The tools are significant disruptors to the provider workflows, so there is a lot that goes into putting the tools in. Surescripts does a disservice to health systems by making the products available but not giving anybody the best practices or ideas on how to best implement them." —CPIO

Functionality gaps in Clinical Direct Messaging

"There are all sorts of features that I would like to see in Clinical Direct Messaging. I would love to be able to tack on other things to send in a Direct message. I want to be able to control the content of the message and add a referral or lab. I want to be able to do a care plan and send it over." —Vice president

Uncertainty about the ability of Record Locator & Exchange to find unique records that help providers

"It provides additional information, but the information isn't very impactful. With our automatic query capabilities and Surescripts' system, we have access to patient information. Our providers rarely need to use the system to find a relevant encounter. It is hard to say whether there is value in the system. We already have all the information 99% of the time." —Director

KLAS' Points to Ponder

The Positives: Surescripts has created interoperability solutions—such as Clinical Direct Messaging, Record Locator & Exchange, and Care Event Notifications—that support meaningful use requirements. These solutions can be used to improve care coordination and close care gaps. Clinical Direct Messaging is based on a national directory of DirectTrust accredited organizations representing over 750,000 individuals and organizations. This solution is broadly implemented across providers and payers in the US and is included in the majority of EMR products.



Mike Davis

HCIT market research and analysis expert with 40+ years of experience

Organizations should consider the following:

The Value of Clinical Direct Messaging

In September 2020, CMS released updated rules for 2021 that require organizations to report on four objectives and their associated measures: electronic prescribing, health information exchange, provider-to-patient data exchange, and public health and clinical data exchange. Surescripts' interoperability solutions help organizations comply with these regulations.

Impacts and Trade-Offs of the Underlying Technology

Surescripts does not use a public cloud platform for their interoperability solutions. Oracle is used for the data management foundation, and security is based on NIST CSF. Data encryption conforms to standard protocols. Integration with EMRs is based on FHIR, along with other integration protocols as needed for legacy architectures. Currently,

clients are requesting updates to messaging audit services to improve the management of transactions. The newly released Workbench tool may address some of these needs.

Messaging Service Strategies

Provider organizations have many options for exchanging patient information while also complying with CMS' meaningful use regulations. One key consideration factor for selecting solutions is the breadth of the vendor's data sources for connecting providers and payers, such as Surescripts' connection to Carequality via their Record Locator & Exchange solution. When choosing a Direct messaging solution, it is important to consider whether the transactions are being conducted with DirectTrust accredited endpoints. The ability to map Direct messaging services to physician workflows will enhance provider buy-in and identify key service needs.

Audit Function Considerations for Direct Messaging Services

Provider organizations will need to be able to easily audit Direct messaging transactions to ensure messages are being securely routed to intended recipients and to monitor any transaction errors. Many audit systems generate data that is hard for end users to decipher. Instead, these applications should create easily interpreted transaction information and aggregate information about transaction errors by category, supporting organizations' efforts to take corrective action improve Direct messaging accuracy and effectiveness. Flexible search functions for the audit files are also needed.

Surescripts: Company Profile at a Glance

Year founded

2001

Headquarters

Arlington, VA

Number of live customers

Clinical Direct Messaging: 300+
Record Locator & Exchange: 70+

Number of contracted customers

Clinical Direct Messaging: 307+
Record Locator & Exchange: 86+
Care Event Notifications: 15+

Number of employees

600+

Revenue model

Clinical Direct Messaging:
per bed, per user, per transaction,
and flat-rate models
Record Locator & Exchange:
primarily subscription-based
models

Target customer

Health technology vendors,
including EMRs and analytics
solution vendors, as well as
health systems, pharmacies,
PBMs, and health plans

Healthcare Executive Interview



Garrett Dawkins,
VP, Product Innovation,
Product and Portfolio Enablement

Why was Surescripts started?

We work to deliver the right information for the right purpose at the right time, all while maintaining the highest standards for network access, security, and performance. Our customers rely on us to provide access to the most comprehensive nationwide data set of patient visit and clinical document locations from across EHR systems through Record Locator & Exchange. Within their EHR or health plan software workflow, users can count on advanced querying capabilities and a comprehensive master patient index to automatically see where else patients have received care. Additionally, Clinical Direct Messaging lets healthcare professionals seamlessly send and receive information across multiple care collaboration scenarios within their existing workflows.

What is Surescripts' biggest differentiator?

We convene nearly all electronic health records (EHR) vendors, pharmacy benefit managers (PBMs), pharmacies and clinicians, plus health plans, long-term and post-acute care organizations, specialty hubs, and specialty pharmacy organizations. The Surescripts Network Alliance provides access to clinical and medical data for 324 million patients, and the tool is used by the people who care for them during the moments that matter. In 2020, Surescripts delivered 426 million links to clinical documents and sent and received 79.4 million Direct messages.

What is in store for your company's future?

Our purpose at Surescripts is to serve the nation through simpler, trusted health intelligence sharing in order to increase patient safety, lower costs, and improve the quality of care. To achieve that purpose, our innovation is focused on driving safer, more affordable prescriptions and arming healthcare professionals with the patient intelligence they need to close information gaps and make more informed care decisions. Our work is achieved via deep partnerships with our customers across the healthcare ecosystem. And as we innovate within our portfolio, we remain committed to continually advancing the security and performance of the network and ensuring that our customers realize demonstrable value.

Solution Technical Specifications (provided by Surescripts)

Cloud environment

Surescripts does not use a public cloud resource

Development platform

Multi-tier architecture using Java and .Net

Database environment

Configured around Oracle infrastructure

Mobile application environment

No direct mobile application support

Security platform

NIST CSF

Confidentiality

HIPAA compliance, required Business Associate and Non-Disclosure Agreements

Data encryption

Supports multiple data encryption standards

Integration approach

HL7 FHIR, HL7 v2.x, IHE, Direct Standard, Direct XDR Protocol, Proprietary Connectivity

HITRUST certification

Yes

Report Information

Reader Responsibility

KLAS data and reports are a compilation of research gathered from websites, healthcare industry reports, interviews with healthcare, payer, and employer organization executives and managers, and interviews with vendor and consultant organizations. Data gathered from these sources includes strong opinions (which should not be interpreted as actual facts) reflecting the emotion of exceptional success and, at times, failure. The information is intended solely as a catalyst for a more meaningful and effective investigation on your organization's part and is not intended, nor should it be used, to replace your organization's due diligence.

KLAS data and reports represent the combined candid opinions of actual people from healthcare, payer, and employer organizations regarding how their vendors, products, and/or services perform against their organization's objectives and expectations. The findings presented are not meant to be conclusive data for an entire client base. Significant variables—including a respondent's role within their organization as well as the organization's type (rural, teaching, specialty, etc.), size, objectives, depth/breadth of software use, software version, and system infrastructure/network—impact opinions and preclude an exact apples-to-apples comparison or a finely tuned statistical analysis.

KLAS makes significant effort to identify all organizations within a vendor's customer base so that KLAS scores are based on a representative random sample. However, since not all vendors share complete customer lists and some customers decline to participate, KLAS cannot claim a random representative sample for each solution. Therefore, while KLAS scores should be interpreted as KLAS's best effort to quantify the customer experience for each solution measured, they may contain both quantifiable and unidentifiable variation.

We encourage our clients, friends, and partners using KLAS research data to take into account these variables as they include KLAS data with their own due diligence. For frequently asked questions about KLAS methodology, please refer to klasresearch.com/faq.

Copyright Infringement Warning

This report and its contents are copyright-protected works and are intended solely for your organization. Any other organization, consultant, investment company, or vendor enabling or obtaining unauthorized access to this report will be liable for all damages associated with copyright infringement, which may include the full price of the report and/or attorney fees. For information regarding your specific obligations, please refer to klasresearch.com/data-use-policy.

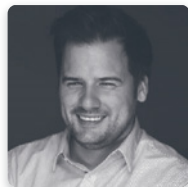
Note

Performance scores may change significantly when additional organizations are interviewed, especially when the existing sample size is limited, as in an emerging market with a small number of live clients.



LEAD AUTHOR
Tyson Blauer

tyson.blauer@KLASresearch.com



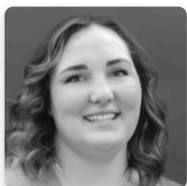
CO-AUTHOR
Joseph Ybarra

joseph.ybarra@KLASresearch.com

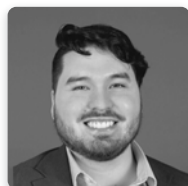


CO-AUTHOR
Jacob Mortensen

jacob.mortensen@KLASresearch.com



DESIGNER
Jessica Bonnett



PROJECT MANAGER
Joel Sanchez



Our Mission

Improving the world's healthcare through collaboration, insights, and transparency.

365 S. Garden Grove Lane, Suite 300
Pleasant Grove, UT 84062

Ph: (800) 920-4109

For more information about
KLAS, please visit our website:

www.KLASresearch.com

Cover image: © bnenin / Adobe Stock