IDC | ANALYZE THE FUTURE

Expanding the Value Equation with athenahealth

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Navigating this White Paper

Click on titles or page numbers to navigate to each section.

IDC OPINION

Pandemic-driven disruption is the new normal for healthcare. COVID-19 put unprecedented stress on providers and catapulted them without warning into digital and virtual care. The toll is extraordinary and marked by revenue loss, decreased patient volumes, and job cuts. These challenges add to preexisting ones such as value-based care, digital transformation (DX), razor-thin margins, and the rise of consumerism. Providers must now bounce back from the lull of deferred elective and preventative visits to survive and thrive in the next normal and that's where EHR/PM vendors can play a vital role.

For providers to thrive under pandemic and post-pandemic conditions, they require an unparalleled disengagement from the past and any traditional thinking. The pursuit of value must now pivot toward nontraditional, emergent next-generational approaches that factor in the rapidly changing context of a world at battle with COVID-19. There are no shortcuts or quick wins. However, like any transformational shift, there is an opportunity to come out stronger and better positioned to adapt to the chaos. By partnering with the right vendor and making well-calculated, long-term investments, the pandemic's impact can be partially offset while providers find new ways to champion care and humanize experiences. Indeed, the pandemic is reshaping how buyers perceive value and how they differentiate one partner from another.

This solution brief aims to inform buyers and decision makers at provider organizations with as few as one physician to enterprise-scale health systems with thousands of physicians that are evaluating EHR/PM vendors in the pandemic era and beyond. Clinical documentation, patient engagement, and RCM sit at the core of provider health IT, but times have changed. Evaluating the vendors that have long catered directly to those workflows through more traditional connotations of value, such as ROI and TCO, will no longer suffice on their own.

Business Value Highlights – athenahealth

66% faster
recognition of revenue

22% more
productive nurses

49% more
efficient billing/revenue cycle teams

>9x more
patients using portals

26% more
productive physicians

9.6%
average increase
in revenue

IDC spoke with healthcare providers about using athenahealth's athenaOne platform to generate new insights into what the market should consider when evaluating an EHR/PM vendor. These providers attributed significant quantitative, qualitative, or perceived benefits to their use of athenaOne, providing a view of the value they are achieving with athenaOne in both tangible and less tangible terms. They underscored the importance of their partnership with athenahealth and the functionality of athenaOne, which they leveraged to enable more efficient and robust back-office operations, free up care providers to focus more on serving patients, and respond quickly to the fast-changing requirements of the pandemic when serving their patients.

Throughout the interviews, providers linked value achieved with athenaOne to:

» **Agility and integration,** including the ability of athenahealth to rapidly roll out telehealth offerings in light of the COVID-19 pandemic

» **Partnership,** including proactive and insightful support from athenaOne customer success teams and an incentive-based model that ensures athenahealth always has "skin in the game"

» **Connections,** including having access to shared data-driven insights, best practices, and learnings from other healthcare providers on athenaOne's network

» **Transparency and automation,** which not only reduces the burden on back-office and support teams but also optimizes revenue collection and generates efficiencies for caregivers

Overall, interviewed healthcare providers described athenaOne as a foundational component of their ability to serve their patients effectively and offered many examples of how it helped them adapt to and succeed under changing and challenging pandemic-driven conditions.

SITUATION OVERVIEW

According to IDC, the impact on IT spend for U.S. healthcare providers entails a time frame of at least 5 to 12 months before any return to normal, from the point where the crisis subsides. EHR/PM vendors made progress aligning capabilities with providers' needs in response and adaptation to the pandemic. 50.7% of providers reported business operations resiliency as the top priority under COVID-19, and 41.4% want to close any gaps in their digital transformation efforts. Much of the focus on resiliency and DX was seen as the pandemic took hold. Vendors scrambled quickly to aggressively push their updates that reflected emerging pandemic guidelines alongside newly deployed questionnaires, lab compendiums, and clinical decision support for COVID-19. Furthermore, vendors employed similar strategies in terms of how
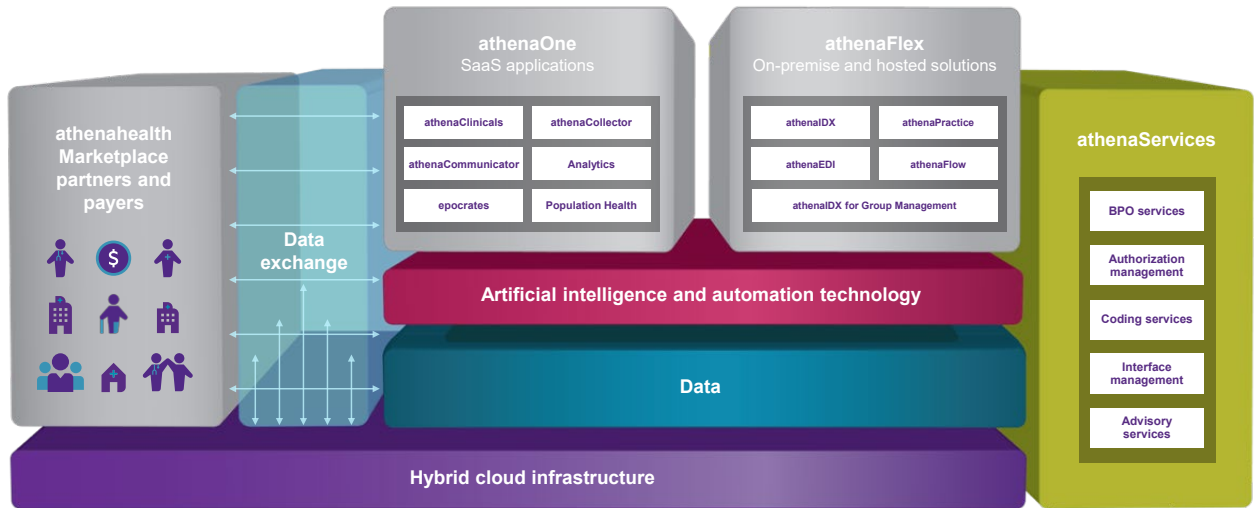
customers became "COVID-19 ready" with virtual and digital care capabilities to further social distancing while facing higher demand for IT services and support.

The fluidity of the pandemic presents a unique challenge for providers and vendors alike. The provider response fragmented somewhat during the initial wave. Case volume declined in general and telehealth visits drastically increased but with variability across clinical specialties, visit types, geographic areas, and organizational sizes. It took some time to figure out how to recalibrate care and optimize workflows. Now, in-person visits have started to mark the early beginnings of a rebound to normal for some providers but remains context specific, dependent on visit type, and how the pandemic plays out. For example, visits continue to be in a relative state of decline for elective areas such as surgery and procedure-intensive specialties (e.g., orthopedics and cardiology) in addition to pediatrics and preventative care. The looming issue of a "twindemic" with the coinciding flu season raises new uncertainty about what lays ahead for providers and various scenarios that could play out.

The key takeaway is that COVID-19 continues to upend industry norms and shake market foundations. Any real or perceived volatility, uncertainty, complexity, and fluidity will factor into health IT spend and perceptions of value. Providers never foresaw two years of DX happening over two months, or that DX would need to take place on the brink of survival. Naturally, providers will question old ways of doing things and what value looks like in the digital era's pandemic-driven chapter. While things like market consolidation may have played an important role in decisions over the past decade, other more contextual considerations (e.g., visit types, organizational size, location) will come to matter as well. Buyers must consider how vendors can enable them to manage the nuances of preexisting, current, and future challenges through a combination of rich expertise, data-driven capabilities, and meaningful partnerships. With this frame of reference, value will be looked at in terms of outcomes and impact, in addition to dollars.

ATHENAHEALTH'S ATHENAONE PLATFORM

athenahealth, based in Watertown, Massachusetts, is a provider of network-enabled software and services for medical groups and health systems nationwide, and it is a leading market player in the outpatient, ambulatory care segment. In 2019, athenahealth joined forces with Virence Health (formerly GE Healthcare's Value-Based Care Solutions Group), under the athenahealth brand, to create an extensive national provider network of customers and an expanded portfolio of solutions. The merger gave athenahealth a formidable market position that paves the way for the company to further innovate and compete. Figure 1 shows a description of athenaOne.

Figure 1. athenahealth's athenaOne Platform

athenaOne
SaaS applications

athenaClinicals	athenaCollector
athenaCommunicator	Analytics
epocrates	Population Health

athenaFlex
On-premise and hosted solutions

athenaIDX	athenaPractice
athenaEDI	athenaFlow
athenaIDX for Group Management	

athenahealth Marketplace partners and payers

Data exchange

Artificial intelligence and automation technology

Data

Hybrid cloud infrastructure

athenaServices

- BPO services
- Authorization management
- Coding services
- Interface management
- Advisory services

Source: athenahealth 2020

The athenaOne platform (athenaClinicals, athenaCollector, athenaCommunicator) leverages a connected network to generate insight across 110 specialties and offers a fully integrated suite of solutions for providers to address clinical, revenue cycle, and patient engagement workflows. This network-enabled, SaaS-based platform also combines other capabilities that expand the platform into a broader end-to-end play, including the athenaOne mobile app, telehealth, data-driven network insights, reporting, a co-sourcing model, interoperability, application marketplace, user group community, and customer success and advisory teams. athenaOne formed the centerpiece of athenahealth's COVID-19 response, enabling customers to adapt and respond to the pandemic. athenaOne's cloud architecture made it possible for customers to quickly switch on components, such as telehealth, while integrating these components to clinical documentation and revenue cycle workflows to minimize friction and disruption.

IDC conducted six in-depth interviews with healthcare providers using athenaOne to deliver care to patients. The findings illustrate vital elements of how these providers pursued value through their athenaOne journey from the pre-COVID-19 to the pandemic-driven era and into the next normal.

ASSESSING THE VALUE OF ATHENAHEALTH

Firmographics

Interviews were designed to understand the impact of the healthcare providers' relationship with athenahealth and their use of athenaOne from both a qualitative and quantitative perspective. Study participants ran the gamut from small healthcare providers focused on a single community to larger providers with distributed networks of hospitals and clinics. This variation is reflected in the average versus median metrics in areas such as number of employees (average of 16,732, median of 155), number of care providers (589, 31), and collectible revenue per year ($2.23 billion, $10.7 million) (see Table 2 in Appendix for average firmographics information for participating organizations). Figure 2 provides more information about interviewed healthcare providers using the athenaOne platform.

Figure 2. Overview of Interviewed Organizations

Optimal Pain & Regenerative Medicine PLLC

Role:	Executive Director
Type:	Independent practice in TX
Size:	4 physicians
Specialty:	Pain Management

The Urgent Care Group, PA

Role:	CEO
Type:	Urgent care group in NJ
Size:	10 physicians
Specialty:	Emergency Medicine

Quorum Health

Role:	SVP of Physician Services
Type:	Nationwide hospital operator
Size:	500 providers
Specialty:	Multispecialty

ESD Pediatric Group

Role:	Physician
Type:	Pediatric care provider in OH
Size:	7 physicians
Specialty:	Pediatric care for children and adolescents

Esperanza Health Centers

Role:	Dir. of Billing & Patient Access
Type:	Federally qualified health center
Size:	30 physicians –22 midlevel, 10 behavior health
Specialty:	Community-based primary healthcare, OB/GYN, psychiatry, and behavioral health

Community Health Systems

Role:	Corporatewide AMR medical director
Type:	Nationwide hospital operator
Size:	4,600 physicians
Specialty:	General acute care

n=6 Source: IDC 2020

Understanding Value: Through the Lens of athenaOne Customers

Interviewed organizations spoke about their perception of value as healthcare providers and how it linked to their decision to implement and continue to use the athenaOne platform. Interviewed healthcare providers cited many of the same sources of value, including the functionality and user-friendly nature of the platform itself and athenahealth's willingness and ability to serve as a true partner. These foundational strengths of athenahealth as a partner and athenaOne as a platform served as the basis for most of the benefits study participants realized. These healthcare providers also spoke in greater detail about what matters most to them and how athenahealth and athenaOne link to their ability to achieve value. There were four primary value drivers that emerged in the interviews[1] :

» **Agility and integration,** including the ability of athenahealth to rapidly roll out telehealth offerings in light of the COVID-19 pandemic (This agility in the face of change gives customers confidence that they will have what they need to care for patients, even in the face of tectonic shifts in the industry.)

» **Partnership,** including proactive and insightful support from athenaOne customer success teams and an incentive-based model that ensures athenahealth always has "skin in the game" (athenahealth's goals are aligned with customers' healthcare and business outcomes. Customers highlight the relationships they have with their customer success teams, which result in strong, metrics-driven communication on performance and a recognition of customer needs in the ongoing development of the product.)

» **Connections,** including having access to shared data-driven insights, best practices, and learnings from other healthcare providers on athenaOne's network (Given the need to continually innovate and meet changing market and patient requirements, study participants lean to a significant extent on best practices and experiences of other healthcare providers dealing with similar challenges, as well as insights derived from network benchmarks, and the expertise of athenahealth's marketplace partners.)

» **Transparency and automation,** which not only reduces the burden on back-office and support teams but also optimizes revenue collection and generates efficiencies for caregivers (From an operational perspective, interviewed healthcare organizations linked the functionality of the athenaOne platform to important gains in care provider and staff efficiencies, as well as their ability to recognize and collect revenue. They attributed these benefits to having the athenaOne platform handle many day-to-day activities, especially those related to documentation, as well as enhanced visibility and automation of information flow across their operations.)

[1] Additional details regarding the value drivers can be found in the Business Value of athenahealth section.

IDC's interviews included discussions with small group, medium-sized group, and large enterprise care providers. Despite their very different sizes and scales of operation, interviewed organizations consistently returned to these themes in describing the value they are achieving with athenaOne. To demonstrate how these areas of value resonate with providers of varying sizes, this study profiles one interviewed care provider within each category.

Case Studies: Use of athenaOne

Small Group Provider: ESD Pediatric Group

ESD Pediatric Group provides care to children and adolescents in the greater Cincinnati area with two office locations staffed by seven pediatricians and five nurse practitioners. IDC's research shows that striving for better quality measurement and operational efficiencies are top goals for small providers. Areas such as clinical workflow and revenue cycle optimization pose opportunities and challenges for these providers.

According to Dr. Jeff Drasnin of ESD Pediatric Group, his organization chose to deploy athenaOne with an eye on improving workflow efficiencies, especially in terms of billing and collections functionality. He explained that, as a small group provider, ESD Pediatric Group seeks ways to run its operations as efficiently as possible, which thereby frees up its pediatricians and nurse providers to focus on patient care and protect their after-expense income. He noted: *"As pediatricians, none of us got into this to get rich, but being able to run our business efficiently and in a profitable way enables us to focus on patient care."* He credited athenaOne with providing best practices that help his organization run its business more efficiently, thereby improving patient care levels and increasing collectibles.

Drasnin explained that athenaOne has helped ESD Pediatric Group operate more efficiently on both an ongoing basis and in response to the COVID-19 crisis. He emphasized that the athenaOne's shared-incentive model has been especially beneficial in light of the pandemic: *"athenahealth is incentivized to get our billing back up in the face of a downturn. This shared objective helps improve both of our bottom lines. This alignment is of high value to us."* He continued: *"Because what we pay to athenahealth is based on revenue, our payment to them went down when we had a slowdown due to COVID-19. If we had a fixed line-item cost for this service, we would not have had our expenses track with our income."*

Drasnin also noted the importance for ESD Pediatric Group of being able to implement telehealth quickly and efficiently in light of changing conditions: *"With COVID-19, athenahealth has been able to pivot and provide telehealth in a timely manner. This is demonstrating a knowledge of what's of value to their clients and working to deliver it. This impresses me as a core part of how they operate; working to drive the value their clients need."*

Drasnin also laid out the value that athenaOne brings to his organization on an ongoing basis in a number of key areas:

» **Practice management:** Drasnin described how athenaOne has helped ESD Pediatric bill and collect more effectively and efficiently. He noted: *"We have the capacity with athenaOne to put our own billing stop rules into the system. Our billing cycle used to be 50 days; it's now 14–15 days …. Understanding and having visibility into future cash flow is vital to running a business."* Not only has ESD Pediatric moved up its time frame for collecting revenue, but Drasnin estimated that its five-person practice management team is 60–80% more productive with athenaOne.

» **Caregiver productivity:** Drasnin commented on how athenaOne has helped ESD Pediatric's doctors and nurse practitioners focus on providing care to patients rather than handling administrative tasks. He explained: *"The efficiencies we gain with athenaOne due to templates allows us to greatly reduce the time required to document each patient interaction."* These day-to-day efficiencies in documentation add up; Drasnin put typical time savings for doctors and nurses at around an average of 10 hours per week, an important gain given its limited number of doctors and nurses.

» **Claim management:** Drasnin noted that evolving requirements surrounding claim management and broader transformation in medical care mean that ESD Pediatric must keep up. He emphasized the importance of athenahealth's network in gaining access to best practices from other care providers: *"The ability to get this kind of actionable data specific to our needs is where athenahealth beats the competition."* He commented on the benefit for ESD Pediatric of athenaOne in terms of successfully making claims: *"athenaOne helps us better track the rules necessary to simply and successfully manage claims."*

Medium-Sized Group Provider: Esperanza Health Center

Esperanza Health Center provides primary care and behavioral health and wellness services across the Chicago area to tens of thousands of patients per year across four sites. It focuses on serving its communities regardless of insurance status or ability to pay. According to IDC, medium-sized groups exhibit the dynamics and challenges of managed organizations where technology capacity and scale come into play alongside the struggle to improve quality, experience, engagement, and revenue.

Jeff McInnes, director of Billing and Patient Access at Esperanza, stressed the importance of quality and innovation in selecting athenaOne. He commented: *"We talk about quality a lot in the context of value-based care. Quality, especially UDS reporting, is very important to us and has been a primary focus, and it's something that drew us to athenaOne."* McInnes also spoke very positively about his organization's partnership with athenahealth and its athenahealth customer success manager: *"She is dogged in pursuing our needs and very good at framing issues and level setting with us. It really helps us make sure we're moving in the right direction and have the right expectations."* He also described Esperanza's relationship with athenahealth as a partnership in the context of the shared-incentive model: *"We appreciate the model. It may be more expensive, but it's clear that athenahealth has skin in the game. The result is that we get a long-term partnership. They're in it with you for the long haul, not just through the initial setup."*

McInnes described athenaOne as key to Esperanza's ability to quickly adapt to serve its patients in light of the COVID-19 pandemic when it realized that it needed to move quickly to implement telehealth and COVID-19 testing capabilities. Initially, his organization was not certain how athenahealth would factor into these efforts, but he noted: *"We were surprised by how much athenahealth really stepped up to the plate. They helped us deal with the changes to billing in the context of telehealth …. As a result, we ended up being among the first providers in the state to be reimbursed for telehealth."* Furthermore:

» **Increased transparency for front office support:** McInnes explained that Esperanza brought its revenue cycle management team back in-house with athenaOne and that the visibility and transparency provided by the platform enables high performance for this team. *"athenahealth brings a level of confidence about your everyday claims that allow my team to focus on the more challenging ones …. athenahealth allows us to keep our collection rates really high."* He estimated that the four-person team would need to be at least doubled without athenaOne.

» **Care provider productivity:** McInnes attributed important efficiencies for its care providers to the athenaOne platform. He explained: *"Our providers' productivity has definitely improved …. Because our providers are not spending as much time fumbling around on their computers with athenaOne, they are able to put more focus on the patient."* McInnes put the impact of these efficiencies for physicians and nurses as being able to see around 30% more patients, an important enhancement in their ability to focus on providing care.

» **Claims success rate:** McInnes described the impact the athenaOne platform has had on Esperanza's ability to collect on claims: *"Our claim denial rate has gone way down with athenaOne. We now have super consistent billing."*

Large Enterprise Provider: Quorum Health

Quorum Health operates more than 22 general acute care hospitals in 9 states and provides a variety of healthcare services to patients. With thousands of beds at these hospitals and over 500 care providers, Quorum must balance the challenges of ensuring high-quality care with managing this volume of patient care. Increasing technology capacity and scale is the top goal for larger provider organizations where the right infrastructure is key for improving competitive positioning and future readiness in addition to advancing other important goals, such as those of quality improvement.

Ed Corns, SVP of Physician Services at Quorum Health, noted that his organization evaluates healthcare solutions in line with the challenges of operating as a larger healthcare provider: *"Value for us comes in having an infrastructure that is consistent, reliable, scalable, and produces a consistent, known product."* Corns explained that having this type of foundation with athenaOne is especially important for Quorum, which brings new organizations into its network with regularity: *"It's really easy for us to integrate organizations we acquire and transfer data into the system with athenaOne. Because we have a lot of experience with athenaOne, we're not afraid to face those challenges when some business decision or outside driver needs us to do that. athenahealth is very adaptable — it's always been one of its strong suits."*

Corns also described athenahealth's role as integral in helping Quorum respond to challenges posed by the COVID-19 pandemic. He noted that this was especially noticeable given Quorum's longer-term relationship with athenahealth — more than 10 years — and its ability to shift direction to support Quorum. He commented: *"athenahealth has always been accessible and responsive. When COVID-19 started, we wanted to do follow-up on some of these visits via telehealth and were able to set this up on athenahealth overnight. The athenahealth customer success group helped make that happen."* He also laid out specifics about how athenahealth drove Quorum's rapid pivot to telehealth: *"Offering telehealth and doing remote documentation became a dire need. athenahealth pivoted quickly to provide these services and gave us flexibility to build telehealth templates into our EMR. We worked with athenahealth to build the telehealth platform on the fly and we've gone from 10 per month to 20,000 per month using telehealth."*

Corns also spoke about how athenaOne supports Quorum's ability to operate at scale in normal conditions, emphasizing the following areas of impact:

» **Revenue cycle and billing:** Corns explained that while Quorum has faced some challenges in leveraging some of athenaOne's functionality in terms of revenue cycle management tasks, it has delivered important overall efficiencies: *"We're more productive on 95% of the processes we have flowing through the athenaOne platform."* He estimated that the team of 15–20 members would need another 5–10 team members to reach effectiveness levels without athenaOne, with the Communicator application especially helpful by enabling customer and patient self-service.

» **Patient management:** Corns attributed Quorum's ability to handle and manage its patient volume in an efficient manner to athenaOne. He said: *"athenaOne has a very powerful rules engine, which helps it do a very good job adding value when it comes to producing revenue …. It has helped build out the integration in its application to allow us to add CCM. That adds significant value and revenue."*

» **Clinical care:** Corns linked the athenaOne platform to Quorum's ability to provide relevant and high-quality care. *"athenaOne has promoted more efficiency and better clinical care. It has made it easier for providers to intake patients, provide patient care, and then document the care …. Again, having telehealth built right into the clinical application has been very important to our providers. That's a prime example of adapting to the market and customers' needs."* Corns also noted: *"athenaOne has an outstanding clinical feedback loop built into the platform."*

CHALLENGES AND OPPORTUNITIES

The market presents vast challenges and opportunities for technology buyers and suppliers alike. Health systems, hospitals, independent physician associations, management service organizations, physician practices, and any adjacent care settings need to essentially transition from the onslaught of the pandemic into a trajectory of growth. Future enterprises that thrive, rather than survive, will organize around high-value, high-return digital transformation use cases and adapt to a care model ingrained more in the shift toward outpatient, virtual, and home care settings.

The challenge for EHR/PM vendors and buyers alike is that many decisions were already taken and large investments made into existing systems. athenahealth offers a compelling value proposition through athenaOne for leaders actively looking to make the switch. The vendor's technology, insight, and expertise coupled with a platform that was always built as a single-instance, multitenant SaaS offering is unique. Furthermore, the company differentiates itself on enabling clients with seamless up-to-date experiences at no added cost or infrastructure in conjunction with a vast network of insights as well as prebuilt connections that bolster its core solution.

As highlighted in the interviews, athenahealth goes to market through an aligned or shared-incentive model, where it collects a percentage of total customer collections based on performance. There are mixed views in the market about this model; however, athenahealth's clients seem to view it favorably especially as the vendor developed over time a clearly defined Customer Performance and Value Framework as a benchmark for performance (see Figure 3).

Figure 3. athenahealth Customer Performance and Value Framework

More collections, faster	Less work, less expense	Lower cost of care, higher care quality (success in VBC)	Better experience
Fee for service revenue	Total cost	Fee for value revenue	Provider and patient experience
Patient volume	**Patient access expense**	**Process Excellence**	**Provider/Staff Experience**
Patient visits/provider	Front office expense	Panel size & complexity	Burnout inventory
Complexity of services	**Patient accounting expense**	**Risk Scoring**	**Patient Experience**
RVU/patient visit	Billing office expense	Potential RAF gap	CAHPS, Press Gainey
Contracted rates	**System Costs**	**Care Gaps**	
Allowed/RVU	IT staff, technology spend	Days to close	
Net collections	**Clinical Costs**	**Cost of Care**	
Collections yield	Providers & clinical support	ED utilization Readmission rate Rate of unnecessary orders	
Speed of payment	**Other Costs**	**Quality Measures**	
Days AR	Rent/supplies	MIPS, HEDIS, PROMs	

Source: athenahealth 2020

Providers need to translate best practices identified from the pandemic response into lasting transformation across the enterprise. Immediate term, COVID-19-related contingency plans will eventually be replaced with longer-term goals and priorities focused on enhanced readiness, better productivity, more meaningful relationships, highly personalized experiences and, ultimately, patient retention, acquisition, and loyalty. Vendors such as athenahealth can benefit from the scope and scale of unified cloud-based offerings when catering to enterprisewide approaches. Coupling these with network-based services, application ecosystems, and the promises of partnerships that can help pave the way for providers to realize clinical and operational excellence as functions of value will be instrumental for the success of the buyer and vendor. The challenge, however, will be in articulating value in compelling ways that go beyond any traditional connotations, such as those of TCO and ROI, while helping providers rethink, reshape, and advance healthcare.

CONCLUSION

Pandemics dramatically change the dynamics of markets, economies, and even nations. The provider health IT market continues to evolve under COVID-19 and a new chapter of the EHR 2.0 era will help providers move not only toward a value-based delivery model but toward a pandemic-proof one rapidly. Vendors, such as athenahealth, will need to draw upon their collective learnings from the pandemic and combine these with their aspirations going forward through solutions such as athenaOne. The customer journeys outlined in this study offered buyers an opportunity to acknowledge that value creation and realization are highly reliant on the technology and vendor. Buyers will certainly need the right technological capabilities to be able to realize a healthy rebound to growth. Still, equally vital will be the need for a partnership that can ensure all progress happens in unison with a synergistic technology journey that builds on mutual determination, incentivized missions, and a shared vision of the future.

BUSINESS VALUE OF ATHENAHEALTH

Business Value

Interviewed healthcare providers described realizing substantial value with athenaOne in several important areas, including enabling more efficient and robust back-office and support teams, freeing up care providers to focus more on serving patients, and responding quickly to fast-changing requirements for serving patients, including the delivery of telehealth and new care access options. For interviewed healthcare providers, this value manifests itself both qualitatively in terms of how they can execute their day-to-day operations and quantitatively in terms of higher productivity for care providers and back-office and support staff, as well as increasing revenue collectibles.

Agility in Providing Care

Interviewed healthcare providers explained that they had leveraged their partnerships with athenahealth and the use of the athenaOne platform to significantly improve their ability to respond to changing market conditions and patient demand. This agility has proven especially beneficial — even essential — in the face of the COVID-19 pandemic. Like healthcare providers everywhere, interviewed organizations were suddenly thrust into a vastly changed market in which the fundamental nature of their ability to interact with patients changed as did patient

concerns. Study participants repeatedly linked their ability to pivot to meet challenges posed by COVID-19 to their use of athenaOne and partnership with athenahealth, especially in terms of rapidly standing up robust telehealth capabilities and onboarding patients to their online portals.

Interviewed healthcare providers gave specific examples of how athenahealth and athenaOne have not only helped but also fundamentally enabled them to address these challenges:

» **Cooperative approach to enabling telehealth on short notice with COVID-19:** *"When COVID-19 started, we wanted to do follow-up with some of our patients via telehealth and were able to set this up on athenaOne overnight. Their customer success group helped make that happen."*

» **Enabling remote practice:** *"If the pandemic had happened on our old system, we would have been dead in the water …. The ability for us to keep the business going remotely during the lockdown with athenaOne allowed us to maintain patient contact."*

Beyond the intangible benefit of maintaining operational continuity and addressing patient demand in a rapidly changing environment, study participants also linked their use of the athenaOne platform to specific gains in terms of patient use of their online portals and seeing a tenfold increase in portal usage on average (going from 4% to 41% of patients using their online portals). This has not only enabled them to better work through the challenges posed by COVID-19 but will also position them to be more digitally and patient focused whenever conditions normalize.

Value of Partnership with athenahealth

Interviewed customers repeatedly stressed that their partnerships with athenahealth are fundamental to their success. They underscored the criticality of having a partner that is responsive, proactive, and focused on their success. Among the characteristics of their partnerships with athenahealth cited were:

» **athenahealth's willingness to actively listen and incorporate customer feedback:** *"athenahealth listens to our feedback in a very active way and that feedback turns into progress we see in the development of our EMR system. athenahealth has been responsive, and we are seeing new features being added based on requests we've made over time."*

» **Real-time communication of issues and open communication channels:** *"We have such routine meetings with athenahealth that for me, it's almost a day-to-day and certainly a week-to-week relationship. This means we can communicate in real time any problems we have or requests we want to make about the product. They listen and we've seen evolution of the application as we've made requests."*

» **Aligned goals in terms of healthcare and business outcomes:** *"athenahealth works to align themselves with our goals. We have the same goals to provide good healthcare and generate revenue from that."*

These strong and diverse testimonials from athenahealth customers share a common foundation in describing athenahealth as a long-term and real partner that will be responsive and supportive not only for handling unexpected contingencies such as COVID-19 but also for creating and maintaining a successful healthcare practice in the longer run.

Establishing Foundational Connections

Interviewed healthcare organizations also place value on their ability to access the athenahealth provider network through athenaOne. Given the need to continually innovate and meet changing market and patient requirements, study participants lean to a significant extent on best practices and experiences of other healthcare providers dealing with similar challenges. As such, having the ability to connect with other healthcare organizations on the athenahealth network can be invaluable, with interviewed organizations referencing several types of connections:

» **Professional connections,** which allow physicians across the athenahealth network to collaborate

» **Data connections,** which provide information and insights that help organizations drive efficiency and productivity

» **Patient care connections,** which make best practices pertaining to care and learnings for topics such as COVID-19 available to all providers on the network

Interviewed athenahealth customers spoke about the centrality of these network-driven connections to the value they are achieving with athenaOne. One interviewed organization explained: *"A lot of the value we achieve with athenahealth is connections to other providers that are in the same practice area. The whole concept of athenahealth as a network is all about facilitating making connections."* Another athenahealth customer noted its use of the application marketplace on athenaOne: *"athenahealth's application marketplace helps get a lot of other companies into the ecosystem …. It's worked out very nicely to be able to have integration of other services we need."*

Transparency for Operational Efficiency and Success

From an operational perspective, interviewed healthcare organizations linked the functionality of the athenaOne platform to important gains in care provider and staff efficiencies, as well as their ability to recognize and collect revenue. They attributed these benefits to having the athenaOne platform handle many day-to-day activities, especially those related to documentation, as well as enhanced visibility and automation of information flow across their operations.

Care Provider Efficiencies

For interviewed organizations, little is of higher value than the time of their care providers. These physicians, nurses, and other care providers represent their organizations and provide many of their billable services. As such, healthcare organizations need care providers to be as efficient as possible so that they are focused on delivering top-quality care to patients, rather than spending their time on more mundane administrative and documentation responsibilities.

Interviewed athenahealth customers uniformly reported that the athenaOne platform has enabled care providers to spend less time on documentation and administration, thereby freeing up their time to spend with patients. Not only do these efficiencies mean that care providers spend more time with patients, they also lower the risk of burnout that can be associated with heavy burdens of administrative work. One interviewed athenahealth customer commented: *"The benefit for us of athenaOne comes back to efficiency …. Using athenaOne to help a provider shave five minutes off documenting a patient interaction, we've given five minutes back to that provider that can be used to spend more time interacting with that patient or seeing the next patient …. Giving providers more time to get home and be with their families can make a whole family happier and that helps prevent burnout."*

Further, physicians and nurses can more easily access patient and other information, allowing them to provide more seamless and uninterrupted care with athenaOne. Given the extent of documentation and administrative work surrounding care-providing activities, efficiencies for physicians and nurses achieved with athenaOne have substantial impact and value. On average, interviewed organizations reported that physicians are 26% more productive and nurses 22% more productive, reflecting the vital impact athenaOne has had on their day-to-day work activities (see Table 1).

Table 1. Care Provider Productivity Gains

	Annual Value, Per Organization	Annual Value, Per Impacted Physician/Nurse
Productivity Gains for Physicians		
Average productivity gain, impacted physicians	26%	26%
Value of higher physician productivity, quantified*	$4.35M	$64,200
Productivity Gains for Nurses		
Average productivity gain, impacted nurses	22%	22%
Value of higher nurse productivity, quantified*	$1.72M	$21,700

n=6 Source: IDC 2020 (*see Appendix for salary assumption details)

Back Office and Administrative Efficiencies

Interviewed athenahealth customers also attributed efficiencies for certain back-office and administrative teams to their use of the athenaOne platform. These efficiencies represent the effect of moving significant amounts of day-to-day work away from these teams to athenahealth, which means that these teams are freed up to handle either more volume or focus on higher-value activities. Interviewed healthcare providers provided examples of the impact of athenaOne for clinical administrators and their collections teams:

» **Ease of clinical administration:** *"We are able to address some clinical questions and some of the test results and interpretations in a much more efficient manner with athenaOne."*

» **Reporting transparency that enables administrative efficiencies:** *"We've seen reduced administrative burden of reporting transparency into our operations, where we can look and see what's going on …. We're running a business first and need transparency into our operations in order to be able to manage it in that manner."*

» **User-friendly platform that enables more efficient day-to-day business and caregiving operations:** *"Value for us is something that is user-friendly; easy to use, and easy to learn, and makes our job easier. Value to me as a practice administrator also goes to the cost of doing business …. While not perfect, athenahealth has been good. We have a collaborative model with athenahealth and spend less time on back-end issues and more time with patients, which is a major goal. athenahealth has provided great value in terms of data. We use it to run our practice."*

These efficiencies enable interviewed organizations to run their businesses with streamlined teams in areas such as clinical administration and revenue collection/billing. For example, IDC calculates that interviewed athenahealth customers attribute an average 49% efficiency to their use of the athenaOne platform for their teams responsible for revenue collection and billing.

Increased Revenue Collection

For interviewed organizations, efficiencies and improved platform functionality with athenaOne ultimately result in better collection of billables, resulting in higher revenue. For example, interviewed athenahealth customers reported that the time they require to recognize revenue had fallen substantially with athenaOne, happening around four weeks earlier on average (66% faster, saving 27 days on average) (see Figure 4). One study participant said: *"Our average billing lag is a mere 3.3 days from service with athenaOne and our yield is up as well. Overall, the days required for getting a claim closed is way down."* Earlier recognition of revenue not only improves these organizations' cash flow, allowing them to generate more revenue, but also reduces risk associated with revenue never collected due to prolonged collection processes that create uncertainty.

Figure 4. Time to Recognize Revenue
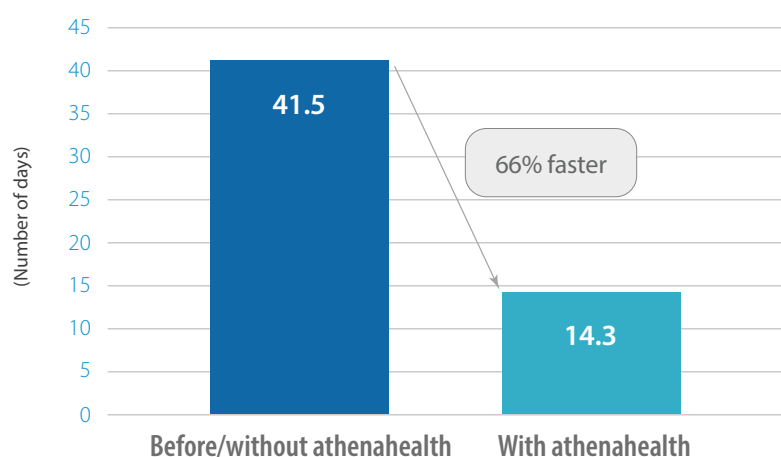
n = 6 Source: IDC, 2020

As several interviewees noted, these organizations' missions are not about maximizing revenue, but achieving higher revenue while providing improved patient care. One interviewed athenahealth customer explained: *"athenaOne has evolved as have the challenges we face. athenahealth is an important front end to our getting money out of insurance companies."* The revenue impact varies by organization: smaller organizations in particular reported substantial revenue gains attributable to athenaOne as demonstrated by average percentage revenue gains of 9.7%, while the average revenue gain of $885,700 shows that the larger organizations were less able to directly trace higher revenue to their use of the athenaOne platform.

APPENDIX

Methodology

IDC's standard Business Value methodology was utilized for this project. This methodology is based on gathering data from healthcare providers using athenahealth's athenaOne platform as the foundation for the model. IDC collected quantitative benefit information during the interviews using a before-and-after assessment of the impact of using athenahealth.

On the basis of feedback from interviewed organizations, salary assumptions for this study are as follows:

» Physician salary = $248,000 per year

» Nurse salary = $98,500 per year

Note: All numbers in this document may not be exact due to rounding.

Additional Firmographic Information

Table 2 provides additional information about average, median, and range numbers in key firmographic areas for interviewed healthcare organizations.

Table 2. Firmographics of Interviewed Healthcare Providers

Firmographics	Average	Median	Range
Number of employees	16,732	155	32 to 80,000
Number of IT staff	75	1	0 to 400
Number of practices	382	5	2 to 2,256
Number of hospitals	20	0	0 to 100
Number of total beds	3,097	17	0 to 16,000
Number of FTE providers	589	31	8 to 3,000
Total collectible revenue per year	$2.23 billion	$10.7 million	$3.6 million to $13.2 billion

n=6 Source: IDC 2020

ABOUT THE ANALYSTS

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Matthew Marden is a Research Director in the IDC Business Value Strategy team. He is responsible for carrying out custom business value research engagements and consulting projects for clients in a number of technology areas with a focus on determining the return on investment (ROI) of their use of enterprise technologies. Matthew's research often analyzes how organizations are leveraging investment in digital technology solutions and initiatives to create value through efficiencies and business enablement.

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Mutaz Shegewi leads the provider research practice at IDC Health Insights covering topics of most relevance to healthcare provider organizations looking to digitally transform and become more digitally native than their competition. Mutaz advises the executive, clinical, and technical leadership of the world's foremost health information technology supplier and buyer organizations by producing data-driven research and thought-leadership insights that help to navigate strategic challenges in health information technology and transform complexity to clarity in decision-making that would decrease costs, enhance quality, optimize access, improve patient safety, and champion patient experience. Mutaz is passionate about strengthening healthcare systems through the dynamic interrelations between technology, patients, and providers by combining industry, professional, academic, technical and global expertise in healthcare, policy, business, management, research, consulting, and medicine.

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