Patients and staff depend on you to make the best data-driven decisions. To thrive in a value-based care world, hospitals need efficient resources to help improve clinical quality, help improve clinical patient satisfaction and operational efficiencies.

Healthcare systems are repeatedly faced with numerous operational, financial and clinical challenges – 24 hours a day, 365 days a year.

Did you know?
- Medical errors are the third leading cause of death each year¹.
- Expense growth continues to outpace revenue growth, nearly one-third of hospitals have operating losses each year².
- Seventy-five percent of chief financial officers think performance management plays a critical role, yet very few are satisfied with the performance management reporting at their organization³.

Hospital executives, including chief financial officers and chief quality officers, remain under pressure to meet regulatory standards while striving to maintain cost, the patient experience, clinical quality and operational efficiency – all with limited resources.

Fifty-nine percent of healthcare dollars are tied to value or quality⁴, while 50 percent of care is tied to value-based reimbursement⁵.

It’s a constant cycle, and the evolving value-based care and pay-for-performance market is driving the need for solutions for improved performance in hospital systems.

In fact, many factors of the cycle, including clinical quality and operational efficiency, can be improved with advanced insights from data.

Imagine the opportunity for your organization to better identify at-risk patients, monitor system performance and benchmark against best-in-class organizations, allowing your organization to use risk-adjusted methods and enhanced reports with meaningful insights and flexible reporting options for all levels of your organization.

Can you pinpoint the areas of improvement in your organization?

Did you know there are steps you can take to heighten your confidence in your system’s data? Learn more. >