Capturing and Communicating the Data

Speaker: Joe Dudas, Mayo Clinic
Now is the time to think about changing the Healthcare Supply Chain
Objectives

• Providing Solutions and Hope for Patients
• Being Trusted and Affordable
• Generating, Evaluating, and Managing Information
• Transforming Delivery
Our patients need to get well

“I’ve had MS for ten years, and my kind is progressive. So I just get worse. I really can’t do anything. I don’t leave my house. You know, it’s hard for me to get out. Noelle, she turned two when they said I had MS.”

- A mom, Alicia Facchino

Source: www.pbs.com
“I had my heart transplant in 1991. Medicare paid me for my operation on my heart and also paid for one year of my medication. And after that one year, I was on my own to get medication.”

- An armed forces veteran, Tom Giardina
WE NEED TO ...

“Provide solutions”
Our patients need safety

The effects of the drug Thalidomide caused one of the greatest tragedies of the 1950s. As many as 10,000 babies around the world were born with severe deformities after their mothers took the medication for morning sickness and insomnia.

“The FDA’s goal is to have data about the use of medicines during pregnancy for all medicines that are used by women of childbearing potential,” says Karen Feibus, M.D., an FDA expert in maternal health.

Source: www.fda.gov
Our patients need security

“Used to treat asthma and chronic obstructive pulmonary disease, the stolen medicine may itself pose a health risk,” FDA experts say. More than 25,000 of the inhalers were stolen from drug maker GlaxoSmithKline’s distribution center near Richmond, Va., last year. They were set to expire in September.

Source: www.fda.gov
Our patients need to be able to trust us

“Trust is a fundamental part of a patient-doctor relationship. Trust can increase patient satisfaction, adherence to treatment, and continuity of care.”
WE NEED TO ...

“Improve the safety and security of our Supply Chain.”
Our patients need affordable care

“You can’t afford total coverage, no matter where you go.”

- A small business owner, Charlie Nielsen

Source: www.pbs.com
Our patients need cost containment
Our patients have other needs

The Growing Affordability Gap

Cumulative active employee health care costs vs. wage increases

WE NEED TO ...

“Significantly decrease the cost of the Healthcare Supply Chain.”
Our patients need us to work together

TEAM INTEGRATION AND COLLABORATION

ENTERPRISE DATA TRUST
Our patients need us to use information.
Our patients need us to make better decisions

### Opportunity Analysis -- Sept. 2009

<table>
<thead>
<tr>
<th>Product Group</th>
<th>MCR Savings Opportunity</th>
<th>MCA Savings Opportunity</th>
<th>MCF Savings Opportunity</th>
<th>Enterprise Totals</th>
<th>% of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arthroscopic Shavers</td>
<td>$33,579.90</td>
<td>$12,026.85</td>
<td>$6,485.78</td>
<td>$52,092.53</td>
<td>3%</td>
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<tr>
<td>Balloon Inflation Devices</td>
<td>$16,055.88</td>
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<td>$1,033.60</td>
<td>$16,055.88</td>
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<tr>
<td>Biopsy Forceps</td>
<td>$80.00</td>
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<td>$1,113.60</td>
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<td>Burrs / Bits / Blades</td>
<td>$128,998.48</td>
<td>$48,023.34</td>
<td>$25,224.68</td>
<td>$202,246.51</td>
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<tr>
<td>Cardiac Stabilization</td>
<td>$16,285.05</td>
<td>$2,311.50</td>
<td>$5,949.60</td>
<td>$24,546.15</td>
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<td>Diagnostic Ultrasound Catheters</td>
<td>$19,238.76</td>
<td>$38,967.88</td>
<td>$32,134.32</td>
<td>$90,340.96</td>
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<tr>
<td>Endoscopic Trocars</td>
<td>$29,844.57</td>
<td>$936.00</td>
<td>$126,710.40</td>
<td>$157,490.97</td>
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<td>EP Catheters &amp; Cables</td>
<td>$43,733.72</td>
<td>$273,913.27</td>
<td>$219,170.07</td>
<td>$536,817.06</td>
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<td>External Fixation</td>
<td>$72,763.09</td>
<td>$447.33</td>
<td>$46,694.61</td>
<td>$119,905.03</td>
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<tr>
<td>Phaco Tips</td>
<td>$1,862.52</td>
<td>$5,751.95</td>
<td>$263.94</td>
<td>$7,878.41</td>
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<tr>
<td>Pulse Oximeters</td>
<td>$(89,297.07)</td>
<td>$(20,091.15)</td>
<td>$491.81</td>
<td>$(108,896.41)</td>
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<tr>
<td>Scissor Tips</td>
<td>$27,390.00</td>
<td>$(2,093.04)</td>
<td>$40,018.00</td>
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<td>Soft Tissue Ablators</td>
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<td>$21,371.25</td>
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<td>Suture Passers</td>
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<td>$2,214.15</td>
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<td>Tourniquet Cuffs</td>
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<td>$965.07</td>
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<td>Ultrasonic Scalpels</td>
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<td>Compression Sleeves</td>
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<td>$(148.52)</td>
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<td>Pressure Infusion Bags</td>
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<td></td>
<td>$612.13</td>
<td>$612.13</td>
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<td><strong>Grand Total</strong></td>
<td><strong>$447,367.09</strong></td>
<td><strong>$696,879.10</strong></td>
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</tbody>
</table>

Enterprise Savings Opportunity = **$2,046,836.55**
WE NEED TO ...

“Improve the quality of our information and use it to work together.”
Our patients need us to utilize information systems

The Mayo Clinic Surgery Information Management System (SIMS) provides real time business intelligence at the time of the procedure. Item costs can be reviewed and selections made prior to opening a product. Cost per procedure can be reviewed by surgical specialties and collaborative decisions made across the enterprise.
Our patients need us to integrate information

“With just two elements (GTIN and GLN) we can connect the SCM, the Enterprise and the Industry.”
WE NEED TO ...

“Move forward.”
Our patients need us use standards
Our patients need us to lead

GLN Registry for Healthcare®
Recommendations for Providers, Manufacturers Distributors
Based on Lessons learned from Minnesota Pilot

Mayo Clinic/Cardinal Health
GLN Implementation

WHITE PAPER
Version 1.1
Published: May 2009
Revised: February 2010

Project Ice Auger – Sunrise 2012 Kickoff
“We’re not waiting until the ice thaws.”
Our patients need execution

Mayo Clinic eStandards Adoption Plan

2008
Set organizational goals: (1) eliminate custom account numbers and (2) eliminate custom product numbers
Educate internal and external stakeholders on the requirements of **GS1 Sunrise 2010**
Identify and enumerate Mayo Clinic’s locations in the GLN Registry for Healthcare.

2009
Test and implement GS1 GLN with first supplier, Cardinal Health.

2010
Ramp-Up on GS1 GLN with additional suppliers.
Educate internal and external stakeholders on the requirements of **GS1 Sunrise 2012**
Request that supplier enumerate and register their products with GTINs.

2011
Launch Lawson 9.0.1.4 with standard GS1 functionality.
Test and Implement GS1 GTIN with first supplier, Cardinal Health.
Establish GS1 GLN as the norm / production standard.

2012
Ramp Up on GS1 GTIN with additional suppliers

2013
Establish GS1 GTIN as the norm / production standard.
WE NEED TO ...

“Deliver.”
Review

• WE NEED TO...provide solutions and hope for patients.
• WE NEED TO...be trusted and affordable.
• WE NEED TO...generate, evaluate and manage information.
• WE NEED TO...adopt data standards.
• WE NEED TO...transform healthcare delivery.
Mayo Clinic patient expectations are high...

Planet Mayo
This is what transformation looks like

Earlier this year, Charles Okeke was allowed to swap his 400-pound behemoth for a compact, 13-pound machine. He was the first patient in the United States to receive the backpack-sized device. He was going home.
Contact Information

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References
GS1 Healthcare US
AHRMM
Mayo Clinic