

# Improved Financial and Operational Performance Leads to Cost Savings for Care New England

Facing financial pressure and internal challenges, Care New England Health System sought to stabilize operations and eliminate inefficiencies to improve financial and operational performance to position themselves for the future.

## Challenge

Market forces, including reduced government reimbursement and increased competition, put increasing pressure on margin at Care New England (CNE). In response, CNE launched an enterprise-wide

“Huron Healthcare was the catalyst to accelerate our transformation journey towards providing high quality, consistent care, while stabilizing financial performance. Their tools and team of experts helped develop our workforce so we feel confident in our ability to sustain the gains achieved throughout the project and continue to execute on additional opportunities.”

ERIN PELLETIER, BUSINESS INTELLIGENCE MANAGER

## Results

Huron worked across every part of the organization to identify and drive exceptional performance. Based on Huron’s opportunity assessment, CNE leadership targeted \$75M+ in annually recurring financial benefit.

**\$27.5M** revenue cycle benefit to-date

**\$11.6M** labor benefit to-date

**\$7.3M** care access benefit

Enterprise-wide identified benefit of **\$78M**

**\$3.3M** added indirect cost revenues due to recalculated indirect cost rates at WIH

initiative called Transforming Together Today (T3), building on their previous transformative work to further their improvement.

## Approach

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**Revenue Cycle:** Huron's team enhanced workflows and oversight systemwide, including hospital and medical group facilities. The engagement created a common reporting and performance analysis package, and significantly improved denial and write-off management. Huron provided support for payer contract negotiations, brought new focus to the charge capture process, and provided interim revenue cycle management.

**Physician Solutions:** Huron and CNE integrated and aligned employed physicians to manage care delivery more effectively and improve the overall stability of the physician enterprise. The engagement redesigned processes, standards, and infrastructure, addressing medical group organizational structure, provider compensation, patient access, provider productivity, and practice management guidelines.

**Labor:** The engagement implemented a volumebased workload methodology, improved the position review process, and included an enterprise-wide span of control implementation. Huron collaborated with CNE management to create Sustainable Improvement Plans (SIPs) and department targets for 187 cost centers.

**Human Resources:** Huron conducted a detailed market assessment across all HR program areas and helped prioritize the phase-in of needed changes. The engagement aligned compensation and benefit programs with national standards and supported labor negotiation efforts, delivering a benefit-to-date of \$16.8 million.

**Clinical Operations:** The engagement redesigned and expanded interdisciplinary rounds across 18 medical/surgical units, supported proactive length of stay management, and standardized the patient placement model. Huron's PatientONTRAC® tool was implemented, allowing leadership to monitor key performance metrics to improve patient flow.

**Care Access:** The engagement addressed patient access challenges through improving the scheduling process for its patients, providers, and internal staff.

Huron collaborated with access leaders across the organization to design and implement leading practice workflows that encourage a patient-centric access model and increase efficiency in scheduling. Huron's Care Access Reporting Suite and a performance accountability structure were implemented to allow proactive review of system-wide key access related metrics. Engagement benefit identified over \$428K and translates into an enterprise-wide benefit of more than \$7.3M.

**Research Programs:** To provide continuing support to CNE's strong research programs, Huron partnered with research leadership to strengthen financial management processes and policies related to study budget development and ongoing research financial management, and identified significant new sources of research revenue and cost recovery. Huron also worked closely with senior physician-investigators and key members of CNE's leadership team to develop business plans and financial models aimed at providing continuing support to CNE's research programs and investigator community during a time of significant organizational change.

**A system-wide approach:** The engagement also implemented new processes and procedures for purchased services, redesigned and strengthened clinical documentation, enhanced CNE's 340B pharmacy program, provided a service line strategy to improve care delivery, and optimized and standardized Research administration and financial management.



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