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Many healthcare organizations are considering using customer relationship management (CRM) systems to manage the development of their provider network. Many healthcare leaders have never managed the deployment of a CRM system and face pitfalls both generic to all CRM deployments and unique to those for network development in health care. Here are a few of the most common pitfalls and how to avoid them:



## **Minimal executive engagement**

An executive champion will almost always be involved in the procurement process, but their involvement may taper off after the ink has dried on the contract. However, executive sponsors need to stay engaged in the project through the design, development and go-live phases of a CRM installation. Without a steady executive hand in the design and development stage, key decisions are made either without strategic input or are delayed, causing deadlines to slip. Without an executive demanding accountability from the system's users, adoption rates are usually lackluster.

## **Keeping the development team walled off from the users**

Development teams often have a hard time understanding the complex requirements of network development for healthcare. While they might be familiar with building systems to manage sales pipelines, CRM developers rarely work with the complex process of managing relationships with several types of health care providers and tracking their performance. As a result, it's important to connect the development team with the end users (provider relations teams) early and often, regularly participating in requirements development and validation sessions. Identifying one business owner for a particular module may be insufficient when the development team doesn't have direct experience with building systems for network development.

## **Trying to make the network perfect at go-live**

Many organizations transition to a CRM system when they realize that provider networks are too

complicated to manage with spreadsheets. Often, users and executives demand that the ever-changing and often internally consistent spreadsheets be identically replicated in the CRM system.

However, that demand is usually counterproductive. First, it adds several layers of complexity to the system, pushing timelines and creating a spiraling problem where spreadsheets outside CRM are being manipulated manually while the development team is trying to replicate them in the system. Second, it creates an expectation on the part of the users that the CRM data should be flawless at go-live, which is unreasonable. That leads the users to reject the system, claiming the data is useless. Instead, leaders should stress that the CRM system won't be perfect at go-live, but that over time, it will evolve into a much more accurate and reliable database as users begin to use, update and improve it.

### **Neglecting a strategy to drive user adoption**

Executives usually worry too much about design issues and too little about user adoption. As a result, when the system goes live there is minimal training, few processes and no accountability to ensure that users actually use the system. Most organizations hold training sessions when the system goes live, which is a good starting point. However, the system often evolves significantly in the first few months as user feedback is incorporated and additional modules are developed. It is helpful to provide ongoing training sessions where users can learn about these new features and share best practices having used the system.

Additionally, it's imperative that executives make the organization accountable for adoption and maintaining high-quality data in the CRM system. It's critical that managers and provider relations staff are partially evaluated by the accuracy and completeness of their documentation in the system

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