

# 2023 MUSE Inspire Conference

June 7-10 Gaylord Rockies Resort & Convention Center | Aurora, CO



## Migrating Reports to Expanse: Can we talk?

Session 1044 – Thursday, June 8, 3:10

Presenter: Jamie Gerardo



# 2023 MUSE Inspire Conference

June 7-10 Gaylord Rockies Resort & Convention Center | Aurora, CO



## Our other education sessions:

- 1044** - Migrating Reports to Expanse: Can we talk?  
(Thursday at 3:10)
- 1039** – Reimagine DR Reports with Power BI (Friday at 2:10)
- 1046** - OR Utilization Analysis (Saturday @8:30)



# Our Agenda



- > Before moving to Expanse
- > During your migration
- > Expanse in TEST, not in LIVE
- > After go-live: more to do!

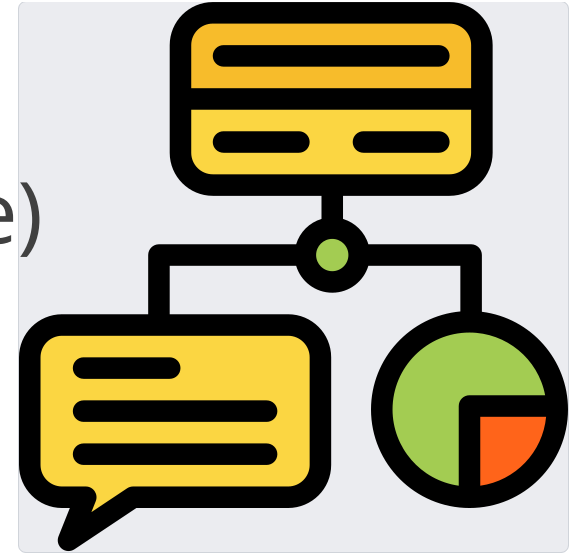
# Considerations before Expanse

Expanse options:

- > [MaaS](#) (MEDITECH as a Service)
- > [Expanse](#)

Data considerations:

- > Do you have a high volume of custom reports?
- > Are you currently using the Data Repository for reporting?



# MaaS

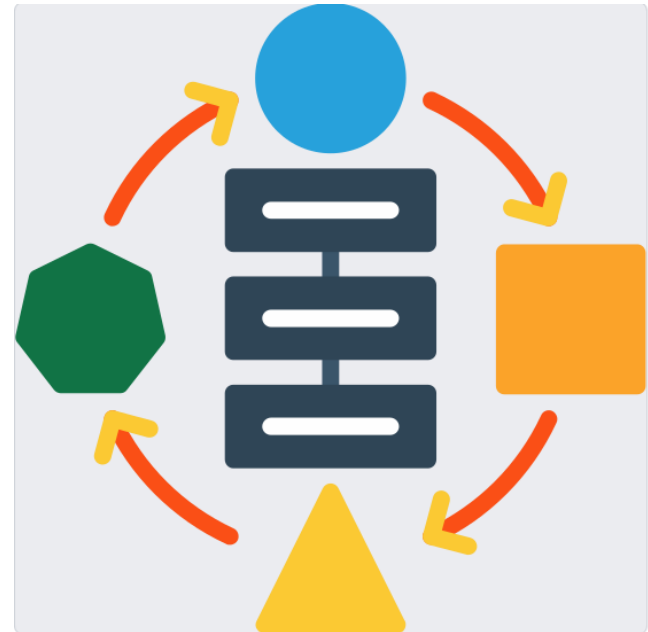
Connection to the Data Repository will be accessed via a Linked Server

- > For reporting, you'll want to have an on-premises SQL Server or cloud-based SQL Server for custom reports.
- > Quality customs won't be viable in the MaaS environment – adherence to best practices is vital for good performance.



# Data and Report Planning

- > Data conversions
  - > What information from MAGIC or C/S can be preserved?
  - > How are legacy applications (LAB, PHA, etc.) affected?
- > Reporting platforms
  - > Report Designer
  - > BCA
  - > SQL Report Services
  - > MS Power BI
  - > Other



# Available Expanse Conversions

MPI/Demo Recall

BAR (Full Billing Detail)

Fixed Assets

General Ledger

Payroll Personal (Employee  
File/Timecards)

Scanning/Archiving Conversion

Data Repository (“joins” combining  
Platforms)

PCI Link (6mos.)

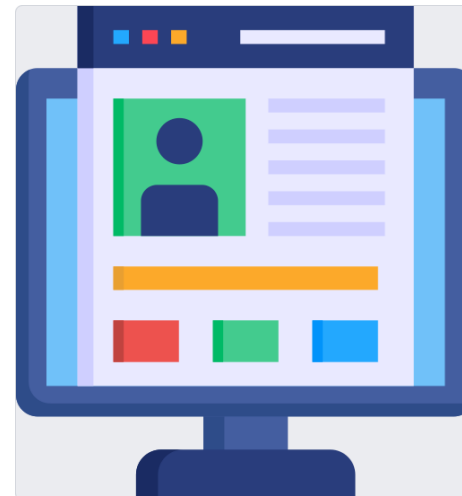
Radiology (Exam History, Impression Text)

Abstract

Blood Bank

Pathology (Historical Path Specimen Info)

Ambulatory (PFSH, Problems, Immunization,  
Home Meds, Allergies)



# Migration Tips

(You've got Expanse in TEST, now what?)



- > Establish a report governance group to prioritize items
- > Build a report inventory of your existing reports
- > What to do with that inventory?
  - > Prioritize report conversions
    - > What's needed for go-live?
    - > What can wait until after go-live?



# Creating your inventory



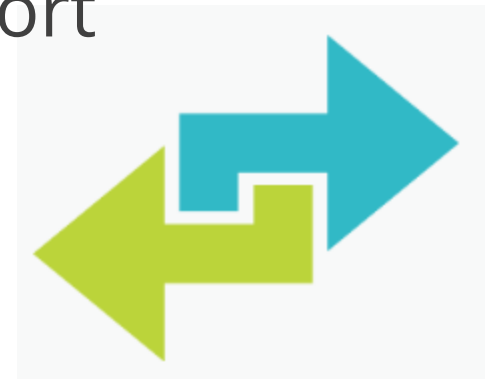
References to help build your inventory:

1. A SQL stored procedure that [lists existing SQL Server Reporting Services reports](#)
2. A SQL stored procedure that [identifies schema dependencies](#) (table and column names) for existing reports
3. Importable NPR/RD reports that list existing custom NPRs/RDs from your system (see [the MAGIC](#) or [C/S version](#) )

# Identify literal values (old to new)

In addition to a report inventory, a list of literal values from reports is very useful!

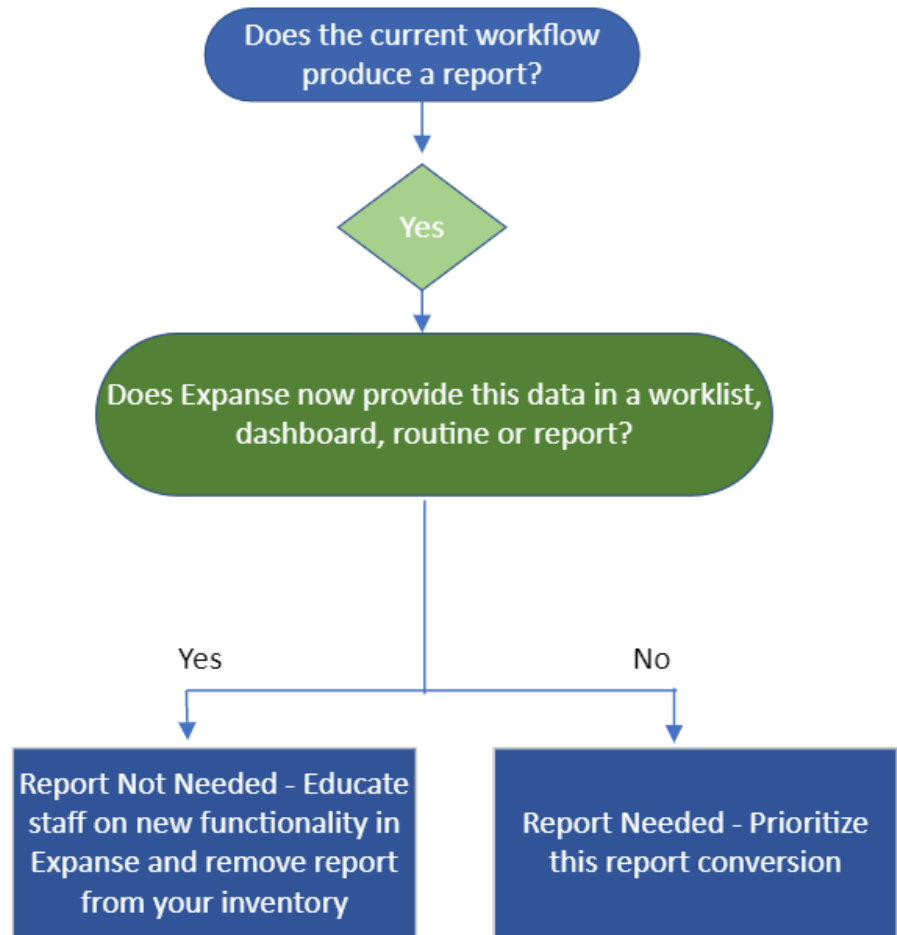
- > Query mnemonics
- > Order mnemonics
- > Intervention or Assessment mnemonics
- > Anything hardcoded within a report



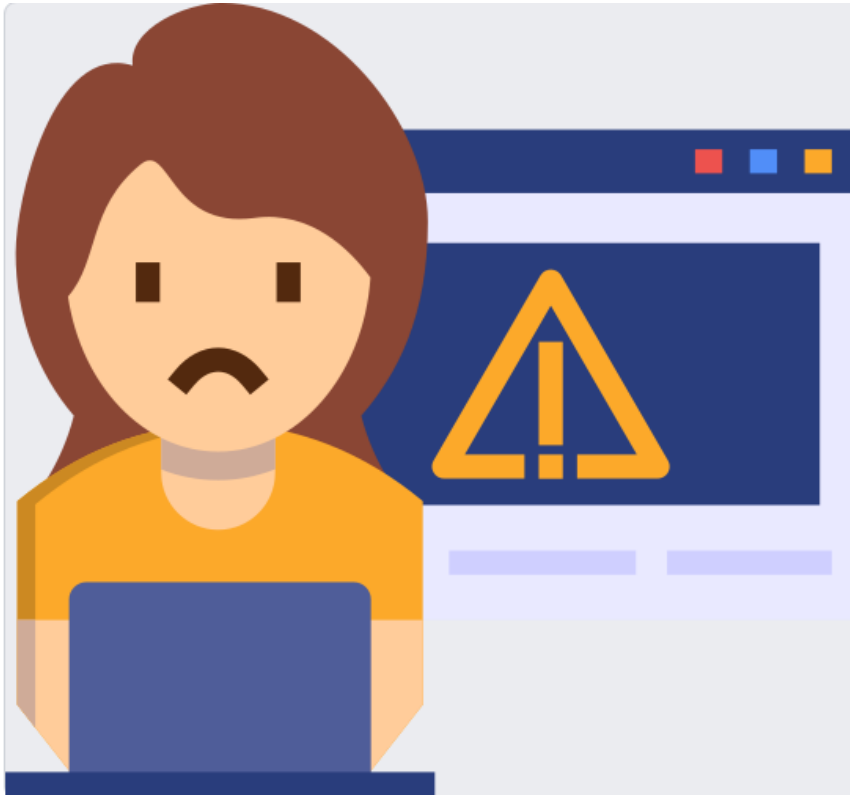
# Expanse Workflows

## Build & Report Evaluation

As your core teams meet, we would highly recommend they evaluate the new expanse functionality with regards to how it applies to your custom reporting needs.



# Data Extracts



- > Prioritize extracts so they are ready at go-live.
- > Updated vendor specifications are very helpful and save time.
- > Extracts from NPR Reports
  - > Knowledge that can assist with understanding the source code that builds the NPR reports (i.e. Macros, fragments, custom fields)

# Technical Recommendations

- > Follow Best practices
  - > [MEDITECH DR Configuration](#)
  - > [Acmeaware Best Practices](#)
- > Turn on all [core tables](#) minimally
- > Naming Conventions in SQL
- > Test Data: Having good test data and patient test scenarios allows the report developer the ability to test code during the report build.



# Technical Recommendations

- > Data Repository Database Server
  - > CPU – 8+ cores
  - > Memory – 64GB +
  - > OS – Microsoft Windows Server 2019 64-bit
  - > SQL Server – Microsoft SQL Server 2019 64-bit



## TEMPDB

Drive with 8 data files and one transaction log file

# Frequently requested custom Expense reports



- > Downtime reporting
- > Physician Practice
- > Regulatory and Quality
- > Clinical coordination
- > Patient Activity
- > Financial and patient Accounts

[Frequently requested custom Expense reports - \(acmeware.com\)](http://acmeware.com)



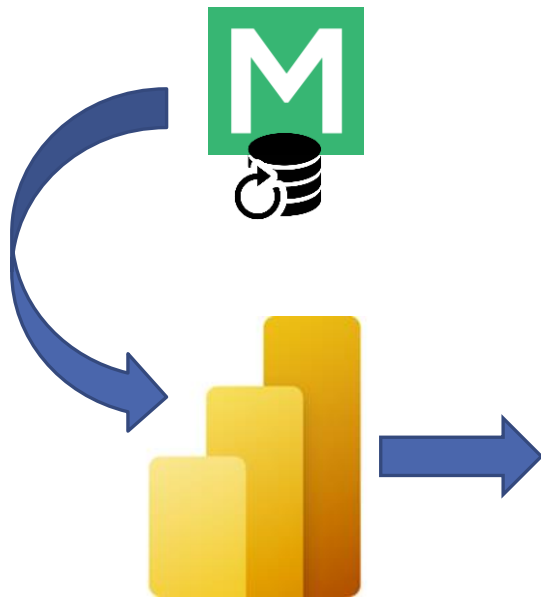
# Reporting Platforms

- > Pick the right reporting tool for the job
- > Data Repository in conjunction with:
  - > Power BI
  - > [SQL Server Reporting Services \(SSRS\)](#)
  - > BCA
  - > Other...
- > Report Designer





# Using Power Bi with DR



BAR Summary and Detail - Power BI Report

https://app.powerbi.com/groups/9ff42349-2091-4306-8710-dac22c6b7428/reports/d27bede2-1f75-4c8d-9096-20c27aa2b7ad/ReportSection?experience=po...

BAR Summary and Detail | Data updated 12/15/22

Pages: Summary, Detail

Post Date: 11/30/2020 to 11/11/2021

Account Status:  AR,  UR,  URAR

Account Type: All

1858 Total Accounts

### BAR Balances

Balance by Insurance

PrimaryInsurance	Balance
SP	4,172,755.80
BCVT	1,563,364.87
MCD	887,156.02
MVP	832,976.30
CIGNA	758,319.67
MCR	748,540.73
TRIC	511,282.37
BCNMC	395,623.09
BCFEP	363,337.66
CBANMC	305,986.78
AARP	282,143.60
BCOS	257,623.12
CBAB	247,537.99
AETNA	169,455.50
LOOMIS	150,306.64
BCBANK	132,554.20
AET	119,795.51
GRWE	94,427.04
AFLA	89,487.27
<b>Total</b>	<b>12,577,968.49</b>

Balance by Type

Balance by Location

Location	Balance	Percentage
PCU	3.88M	30.84%
MSUR	2.07M	16.41%
NUR	2.46M	19.55%
FBC	1.68M	13.35%
ICU	1.32M	10.5%
ER	0.83M	6.62%
DI/NMC	0.85M	6.77%
SS	0.78M	6.21%
Other	0.32M	2.58%

Balance by FinancialClass

FinancialClass	Balance	Percentage
SP	4.17M	33.18%
BC	3.31M	26.32%
CO	2.07M	16.41%
MCD	1.68M	13.35%
CG	1.32M	10.5%
MP	0.85M	6.77%
MCR	0.83M	6.62%
TR	0.78M	6.21%
Other	0.32M	2.58%

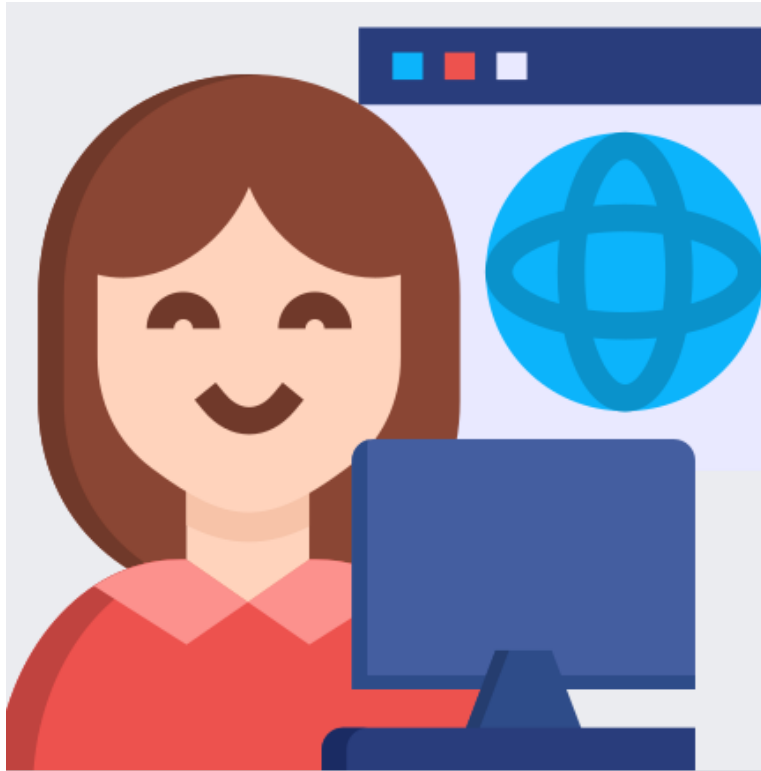


# Other considerations

- > Identify internal resources early and determine if outside assistance is needed.
- > Report validation is key and should be done during the migration when possible.
- > In Expanse you can use MEDITECH External Links in Meditech to keep end users in Meditech when accessing report manager, Power BI or another front-end application URL.



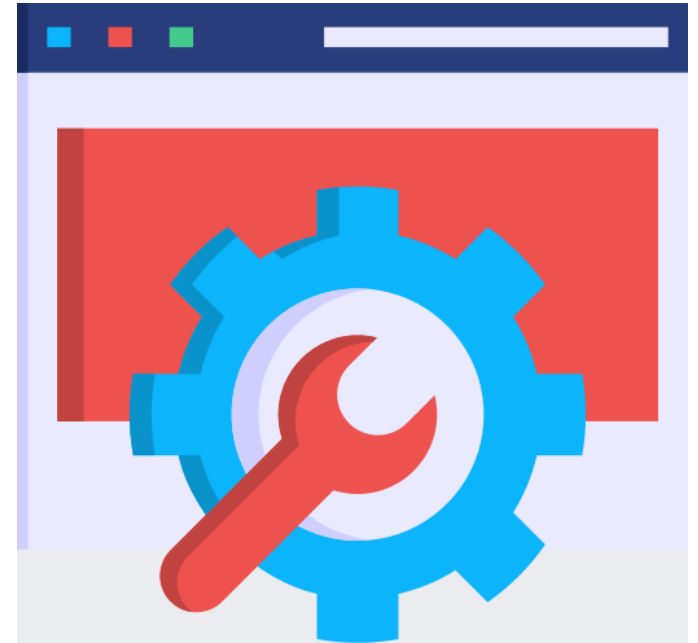
# After the go-live



- > Realistic expectations for using Data Repository
  - > Initial loads for key applications (REG, HIM, etc.) can take weeks or longer
  - > Database size and growth is significant, so plan for routine maintenance now to avoid issues later
- > Considerations for maintaining legacy data
  - > What needs to be kept, and for how long?

# After the go-live

- > Re-evaluate remaining reports conversions and compare with standard reports available in Expanse.
- > Some converted reports may need to re-validated in the live environment



# Resources



Be sure to check out the [DR Network](#) for our no-cost report resources.

- > Reports and SQL code available for download

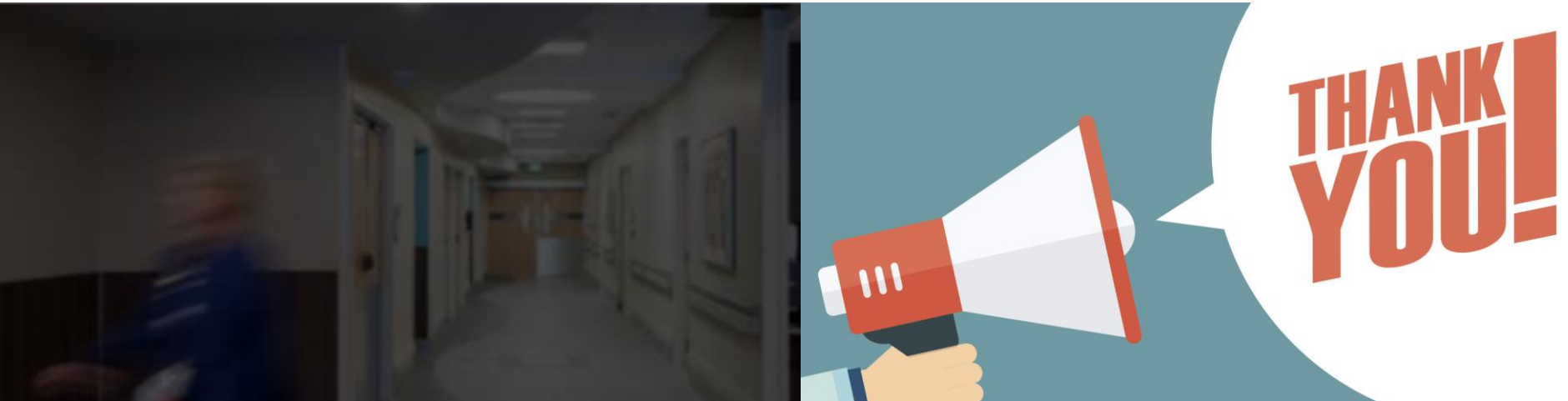
The [AcmeWare Advisor](#) for information on Quality Requirements and Reporting, DR Maintenance Recommendations, T-SQL Guidance, Power BI, and more.



# Open discussion

- > What questions do you have?





Keep in touch!

`jgerardo@acmeware.com`

Our website: <https://acmeware.com>