

Delivering results...Transforming health care



# The Best of Times, the Worst of Times:

HIE Sustainability in the Era of Meaningful Use

Trudi Matthews
Director of Policy and Public Relations
HealthBridge

### We live in an age of turmoil...

It was the best of times, it was the worst of times, it was the age of wisdom, it was the age of foolishness, it was the epoch of belief, it was the epoch of incredulity, it was the season of Light, it was the season of Darkness, it was the spring of hope, it was the winter of despair, we had everything before us, we had nothing before us, we were all going direct to heaven, we were all going direct the other way - in short, the period was so far like the present period...



- Charles Dickens, A Tale of Two Cities



# HealthBridge Background

Why care?



### **Background**

- One of the nation's largest and most successful HIEs
- In operation since 1997
- Serves Greater Cincinnati-Northern KY-Southern IN tri-state area
- Cash-positive, sustainable business model
  - Pre ARRA 97% of revenue from fees; 3% grants
  - 5-8% annual return for the last seven years
- Provides technology infrastructure for four other HIEs



### **Network Size & Adoption**

- More than 3 million clinical messages PER MONTH;
- More than 30 million messages for 2009
- > 1M logins per year; 2.5 M patients in MPI
- Network includes
  - 30+ local hospitals in Kentucky, Ohio and Indiana
  - 5500+ physicians; 800+ physician practices
  - 17 local health departments
  - Large independent commercial labs &
  - Diagnostic centers, nursing homes, etc.
- Feeds to 26 ambulatory EHR vendors, 60+ versions
- Connections to 68 HIS/Data Provider for 10 different organizations



# Summary of Services:

Clinical

#### Results Delivery

- Lab results
- Radiology reports
- Transcribed reports
- Cardiology
- Pathology
- Microbiology
- Admission, Discharge, Transfer Notices
- Ambulatory Order Entry
- Electronic Disease Reporting & Public Health Alerts
- E-Prescribing & Medication Mgmt
- Quality Reporting & Registry
- Basic & Comprehensive EHRs (REC)
- Summary Record Exchange (CMS C-HIEP, SSA pilots)





## HealthBridge Value

HB average cost for electronic results

= <\$0.15

vs. > \$.75

Total cost reduction = \$20 million

Single Interface to EHR vs. Multiple = Reduces Costs by \$50-75K per EHR

Total Cost Reduction, 2009 = \$6 million



# Lessons in Sustainability

Looking back, looking ahead



# A Short History of HIE Sustainability

- HIE Business models poor
- Macro-level savings, not micro-level application
- Grant funding too often used for operations
- We have been here before
- HIE competition high now
- Need clear business model to succeed



### **HIE Case Study**

- Detailed business and technology plans
- Planned query & retrieve HIE with repository
- Value = reductions in duplicative tests
- Funding from hospitals and labs
- What is problematic with this approach?

Answer: not a part of current workflow, expensive to implement, initial value low, cuts revenues for hospitals and labs





Here comes the drink from the fire hose...



#### **Lessons Learned**

- Treat HIE like a business
- Key Areas:
  - Automating paper-based or labor intensive process
  - IT collaboration across sites

#### **Bottom line:**

Low Implementation Costs

- + Adoption
- + Multiple Revenue Sources
- + Time = **HIE Sustainability**





#### **More Lessons Learned**



Interesting...

- Treat grants like capital.
- Don't reinvent the wheel.
- Choose vendors with experience...
- ...But, don't spend a fortune.
- Size matters.
  - Collaborate to reduce costs
- Think like a CFO apply costs to internal budgets?



#### **More Lessons Learned**

- Need multiple service/product lines
- Sequencing of services is critical
- Invest in services with identified funders
- Charge early to fund operations
- Charge based on value received



### **Opportunities Ahead**

- EHR Adoption & Modular Meaningful Use (REC)
- Quality Improvement, Care Coordination & Performance Measurement
  - AF4Q
  - CMS C-HIEP Project
  - REC & Meaningful Use
  - Beacon Community Program
  - CMS Innovation Center
- Federal agency data exchange
  - NHIN Exchange
  - Social Security Administration MEGAHIT disability determination
  - CMS C-HIEP quality reporting
  - CDC Public Health Exchange disease surveillance, reporting



# A Story to Illustrate: Delive How adoption becomes inevitable

#### **Small Independent Practice with an EHR:**

- Practice receives data from HB directly into EHR
- Dr. called a patient; let her know test was normal
- Patient exclaimed –
   "How were you able to get my test so fast?
   I haven't even left the hospital yet.
   I am just walking out to my car."
- Answer: HealthBridge



### **Thank You!**

**Trudi Matthews** 

Director of Policy and Public Relations

HealthBridge

tmatthews@healthbridge.org

www.healthbridge.org

