Health Information Technology for the Disease Management Provider

7th Annual Disease Management Colloquium
Philadelphia, PA
May 7-9, 2007

Clair Callan, MD, MBA, FACPE
Disease management/Prevention

- Partner concepts
- Education approach similar
- Driver for
  - Quality
  - Cost containment
  - Accountability
- Health Information Technology; a tool for today AND tomorrow
Health Information Technology

- Why: Drive quality, cost-effectiveness and patient safety through the use of HIT
- HIT components
  - EMR is central to improved quality and decreased costs
  - A performance improvement model will be an advantage in building an overall strategy.
- Growing criticism of MDs who persist in using paper
- Major activities of daily living are moving online; banking, shopping, travel etc
Is HIT possible today

- Technology
- Knowledge
- Use
- Standards
  - Are all available today-----BUT
- Need
  - financial incentives
  - Mandated standards
HIT Benefits: Both Quantitative & Qualitative

Increase Quality

Decrease Cost
Trends supported by HIT

- Key enabler to drive high quality care
  - Outcome data readily available
- Shift towards patient centered care; HIT has an impact across all settings
- Value based payment models shifting towards effective care at a reasonable cost
- Multi-stakeholder interest in technology and data
Role of Leaders in effecting Change

- Consider what is needed to make IT happen
- Incentives that may work
- Analyze impact in reducing burden of reporting, easy access to information etc.
- Align incentives with quality of care
- Recognize; not buying units of service, are buying outcomes
Presentations

- Build on the case for HIT
  - Workflow management
  - Building registries
  - Medication Care; better outcomes
  - Specific diseases and HIT
  - Role of information in Chronic Disease management