Public and Private Sector Partnerships to Promote HIT Adoption Across the United States

Community-Based Collaboratives Track
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Overview of Our Session

- Overview of What's Happening Across the Country

- Public-Private Partnerships: Connecting Communities for Better Health Program

- The Role of Government: Insights from the Office of the Advancement of Telehealth/HRSA

- Case Study from the Field: Rhode Island Quality Institute

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Pioneers in Health Information Exchange*

- Delaware
- Florida
- Indianapolis, IN
- Los Angeles, CA
- Maine
- Maryland
- Massachusetts
- Michiana Health Information Network, IN
- Michigan
- Minnesota

*Sample

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Pioneers in Health Information Exchange*

- New York
- North Carolina
- Ohio
- Pennsylvania
- Rhode Island
- Santa Barbara, CA
- Tennessee
- Utah
- Vermont
- Washington State
- Washington, D.C.
- Wisconsin

*Sample

What Problems Are They Trying to Solve?

- Improving Healthcare Delivery at Point of Care

- Reducing Costs – Achieving Efficiencies

- Biosurveillance/Public Health Initiatives

- Quality Improvement Initiatives

- Reaching out to Remote, Rural and Underserved Areas

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Common Issues and Challenges

- Organization and governance – engaging stakeholders

- Lack of upfront funding and sustainable model

- Competing entities reluctant to share information that would undermine competitive advantage

- Technical issues: architecture, accurately linking patient data, applications, standards, security

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Health Information Exchange Value

- Standardized, encoded, electronic HIE would:
    - Save U.S. healthcare system $337B over 10 year implementation period and $78B/year thereafter
    - Net Benefits to Stakeholders
        - Providers - $34B
        - Payers - $22B
        - Labs - $13B
        - Radiology Centers - $8B
        - Pharmacies = $1B
    - Reduces admin burden of manual exchange
    - Decreases unnecessary duplicative tests

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Connecting Communities for Better Health

- Catalyzing activities at national, regional and local level to create electronic interoperable health information infrastructure

- $6.9 million program in cooperation with HRSA …additional funding being secured

- Providing seed funding to community-based multi-stakeholder collaboratives that are mobilizing information across organizations

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Connecting Communities for Better Health

- Mobilizing pioneers and experts to develop resources and tools to support health information exchange:
  - Technical
  - Financial
  - Clinical
  - Organizational
  - Legal

Connecting Communities for Better Health

- Disseminating resources and tools and building a dialogue across communities
  - Building a coalition of communities: Working Group for Connecting Communities – launching November 8, 2004
  - *Community Learning Network and Online Resource Center*
  - June 2004 *Connecting Communities Learning Forum* and *HIT Summit Series*
  - Ongoing audio, video and web conferences

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Connecting Communities for Better Health

- Creating and widely publicizing a pool of "electronic health information exchange-ready" communities to facilitate interest and public and private sector investment

- Building national awareness regarding feasibility, value, barriers, and strategies

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Response to Request for Capabilities

- What We Asked For in our 2003 Request for Capabilities Statements:
  - Multi-stakeholder initiatives involving at least three stakeholder groups
  - Matched funding
  - Use of standards and a clinical component
- What We Received:
  - 134 responses representing 42 states and the District of Columbia proposing collaborative health information exchange projects across the country

Recap Communities' Focus

- Strategically focused on critical areas that need to be addressed to implement health information exchange
  - Replicable and sustainable technical architecture models
  - Alignment of incentive models
  - Use of replicable data exchange standards
  - Addressing ways to accurately link patient data
  - Multi-jurisdictional models
  - Electronic prescribing issues

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Communities Being Funded

- Connecting Colorado (Denver, CO)
  - Involves four healthcare delivery institutions
  - Establishing a secure environment and necessary legal framework for sharing clinical data
  - Master patient index
  - Interface engine for clinical data acquisition from four data repositories
  - Secure web server application to display integrated clinical information

Communities Being Funded

- Indiana Health Information Exchange (Indianapolis, IN)
  - Involves hospitals, clinicians, and public health
  - Building upon existing infrastructure for electronic community health record developed by Regenstrief
  - Common, secure electronic infrastructure that is initially supporting clinical messaging
  - Single IHIE electronic mailbox through which clinicians can access clinical results for their patients
  - Learnings shared through Connecting Communities online resource center

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Communities Being Funded

- MA-SHARE MedsInfo e-Prescribing Initiative (Waltham, MA)
  - Anchor project of the Massachusetts Health Data Consortium's MA-SHARE Program
  - Involves health plans and hospital emergency rooms
  - Enables clinicians to access prescription history for emergency department patients
  - Makes available electronic prescribing technology at the point of service

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Communities Being Funded

- MD/DC Collaborative for Healthcare Information Technology (Baltimore/Washington Metro Area)
  - Involves private physician practices, community hospitals, three major academic systems
  - Just getting off the ground…
  - Will provide valuable insights on how to address the challenges of health information exchange in a complex, multi-jurisdictional, metropolitan setting that combines federal, state and local entities

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Communities Being Funded

- Santa Barbara County Care Data Exchange (Santa Barbara, CA)
    - Involves hospitals, physician group practices, public health, labs, and clinics
    - Manages peer to peer technology application whose purpose is to allow community physicians and other providers to securely share patient-specific data without the necessity of a central data repository
    - Learnings shared through Connecting Communities online resource center

Communities Being Funded

- Taconic Health Information Network and Community (Fishkill, NY)
  - Involves 2,300 independent practice association, hospitals, labs, health plans, pharmacies and employers
  - Clinical, insurance, administrative and demographic information will be available through secure internet infrastructure to support care delivery
  - Ongoing support by MedAllies, which is providing training and support to community clinicians and their office staff

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Communities Being Funded

- Tri-Cities TN-VA Care Data Exchange (Kingsport, TN)
  - Involves hospitals, VA medical center, medical groups, public health, pharmacies, behavioral health care providers, health plans and employers
  - Providing foundation for health information exchange in a multi-jurisdictional area
  - Will support care delivery and chronic care management

Communities Being Funded

- Whatcom County e-Prescribing Project (Bellingham, WA)
  - Involves Whatcom Health Information Network, hospitals, medical groups, three specialty practices, and pharmacies (hospital and retail-based)
  - Will support electronic prescribing for those who have and do not have an electronic health record
  - Will test in four pilot sites product that provides formulary information at point of prescription and medication list
  - Part of a broader initiative that is facilitating information exchange between providers and patients

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Communities Being Funded

- Wisconsin Health Information Exchange (National Institute for Medical Informatics – Midwest) (Milwaukee, WI)
  - Involves public health agencies for nine counties, hospitals, business coalition, medical society, and hospital association
  - Single easy-to-use portal for three existing networks: network for emergency care, state public health information network, and state immunization registry

Key Take-aways

- This is hard

- This is very important

- Collaboration is needed…across multiple stakeholders….across public and private sectors…across communities

- Potential gains are enormous…especially for patients….

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Closing

- We are *finally* building momentum…the "stars and planets are aligning"

- The focus has shifted from "whether we should" to "how will we do this?"

- This work will create lasting and significant changes in the U.S. healthcare system…how clinicians practice…how hospitals operate….how healthcare gets paid for*…how patients manage their health and navigate our healthcare system*

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