The Role of Health Information Technology in Patient Safety and Quality Enhancement

The Quality Colloquium

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The Intersection of Quality and IT: On Parallel Paths for Some Time

• The Quality Agenda
  – **Congress** - 2005 Action: Didn’t make it but it will come up again
    • Senate Finance Committee: S. 1356: Medicare Value Purchasing Act of 2005
    • House Ways and Means: H. 3617: Medicare Value Based Purchasing for Physician Services Act of 2005
  – Value based purchasing legislation will likely move forward in earnest in 2007
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• The Quality Agenda
  – Administration
    • Considerable focus within CMS - demonstration programs, voluntary reporting of measures
    • Considerable focus within AHRQ - national quality reports
    • CMS and AHRQ working with private sector through Ambulatory Quality Alliance and Hospital Quality Alliance
    • DHHS transparency initiative
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• The Quality Agenda
  – Private Sector
    • Pay for performance programs on the rise
    • Growing consensus on measurement sets
    • Health plan-led efforts creating large databases to measure quality
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- **The Healthcare IT Agenda**
  - Congress: We just might see a bill this year
    - Senate passes in Nov 2005 Wired for Healthcare Quality Act of 2005
    - House passes in July Better Health Information System Act of 2006
    - Will be conferenced later this year, possibly go into next year
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• The Healthcare IT Agenda
  – Administration
    • Pres. Bush includes HIT in 3 consecutive State of the Union addresses, appoints sub-cabinet level position and calls for every American to have a health record in ten years
    • National Coordinator of HIT takes office
    • Four contracts issued from DHHS to focus on standards harmonization, certification, technical prototypes and privacy
    • AHRQ issues grants and launches HIT Resource Center; and
    • Secretary Leavitt launches the American Health Information Community to develop near-term strategies for HIT adoption
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• The Healthcare IT Agenda
  – Private Sector
    • Provider adoption rates are up – both within hospitals and the physician practices
    • All major healthcare associations building HIT into their policy agenda and services
    • The number of regional initiatives is at an all time high (280 per our last count)
    • RHIOs and EMRs hit the top of the Gartner “hype” curve
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• The Healthcare IT Agenda
  – States: News from eHI’s July and Aug Issue Briefs
    • 38 state legislatures introduced 121 bills which specifically focus on HIT in 2005 and 2006. In 2005 and 2006, 36 bills were passed in 24 state legislatures and signed into law.
    • Ten executive orders were issued by U.S. governors across the nation calling for the development of strategies, plans and recommendations for using HIT and health information exchange to improve health and healthcare.
    • Fifty-three bills emerging from 25 states during 2005 and 2006 call for the creation of bodies such as commissions, councils or task forces to conduct studies, recommend actions, and develop strategies and plans for improving healthcare through HIT. Nineteen of these bills passed in 14 states during this time period.
What’s Happening in the States?

• Most states are convening or participating in multi-stakeholder groups engaged in dialogue to develop plans for improving health and healthcare through HIT.

• 35 states are in the planning or implementation stage

• And, increasingly states are providing grant funds to support not only regional and local HIE efforts, but also the development of plans.

• In most cases, either the Governor's Office or the state's Department of Health is taking leadership in state-wide efforts related to HIT.
## Where are States?

<table>
<thead>
<tr>
<th>Stage</th>
<th>Percentage</th>
<th>Description</th>
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<tbody>
<tr>
<td>Stage 1</td>
<td>15%</td>
<td>Awareness</td>
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<tr>
<td>Stage 2</td>
<td>17%</td>
<td>Regional Activity</td>
</tr>
<tr>
<td>Stage 3</td>
<td>25%</td>
<td>State Leadership</td>
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<tr>
<td>Stage 4</td>
<td>29%</td>
<td>Statewide Planning</td>
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<tr>
<td>Stage 5</td>
<td>8%</td>
<td>Statewide Plan</td>
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<tr>
<td>Stage 6</td>
<td>6%</td>
<td>Statewide Implementation</td>
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- **Recognition** of the need for HIE among multiple stakeholders in your state, region, or community
- **Regional or community-specific HIE activity**
- **Silos of HIE activity with possibly some cross-over**
- **No coordinated, statewide activity**
- **Either legislation has been passed or an executive order issued**
- **Statewide planning initiative being formulated**
- **Well underway with coordinated, statewide planning**
- **Structures in place have statewide representation**
- **Clear on how to deliver statewide plan**
- **Plan / Roadmap complete and accepted**
- **Plan / Roadmap communicated to the public**
- **Implementation of state plan or Roadmap is well underway, with key milestones completed**
Common State Planning Model

- Public-private sector steering group with a set of working groups focused on specific issues
- Assessment of environment
- Needs assessment
- Inventory of current activities
- Making decisions about what to do first...assessing cost, value, feasibility, and urgency
- Development of an incremental roadmap that gets to their long-range vision—mobilization of information to support care delivery – but focuses on high value incremental steps first
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• **The Healthcare IT Agenda**
  – Regions:
    • eHI’s Connecting Communities membership now includes over 280 state, regional and community-based initiatives focused on mobilizing data electronically
    • eHI’s Third Annual Survey will highlight detailed information from 165 of those initiatives
    • Majority are multi-stakeholder initiatives engaging providers, payers, purchasers, consumers, and government
    • Most are non-profit entities
The Intersection of Quality and IT: Now Seeing Some Convergence

• Congress
  – Senate Wired for Healthcare Quality Act requires that any entity that receives funds from the Federal government must implement a quality measurement system
  – Senate Finance Committee bill in 2005 builds use of HIT into the value based purchasing requirements
The Intersection of Quality and IT: Now Seeing Some Convergence

• Administration: Pending Executive Order
  – HHS Secretary Leavitt announced on August 6 a new Bush administration effort to require all providers of federally financed health care to adopt quality-measurement tools and uniform standards for their information technology
  – Goal: Reducing healthcare cost inflation while increasing the quality of medical services individuals receive
  – Executive order specifying new requirements will launch effort – expected “in a matter of weeks”
The Intersection of Quality and IT: Now Seeing Some Convergence

• Administration: Pending Executive Order
  – Requirements likely to mandate:
    • Health providers to join with the government to standardize the requirements for information technology systems coming into their facilities
    • Setting standards for care of specific health problems
    • Developing uniform methods of measuring and reporting the outcomes of treatments.
The Intersection of Quality and IT: Now Seeing Some Convergence

• Private Sector
  – Pay for performance or incentive programs increasingly building HIT into requirements or bonus programs
    • IHA – California
    • Bridges to Excellence – multiple markets
  – AQA and AHA increasingly linking two concept areas
  – eHI building a roadmap for how to align quality initiatives with HIT initiatives
The Intersection of Quality and IT: Now Seeing Some Convergence

• States
  – eHI's recently released survey of state-level activities related to HIT and health information exchange indicate
    • 88% of state leaders from 49 states and the District of Columbia and Puerto Rico cite concerns about the quality in healthcare as a significant driver,
    • while 54 percent cite rising healthcare costs as a significant driver.
  – Several health reform and quality plans authorized by state legislation include references to HIT
    • Six such bills introduced during 2005 and 2006 in four states include such references.
The Intersection of Quality and IT: Now Seeing Some Convergence

• States
  – Increasingly, state legislators are calling for the integration of quality goals into HIT-related plans and requirements for state-funded HIT initiatives and programs. During 2005 and 2006, 12 HIT-related bills introduced in nine states referenced quality specifically and five such bills introduced in four states passed.
  – Six bills introduced in five states required incorporation of quality goals into studies, recommendations, strategies or plans authorized by the legislation, while two such bills introduced in two states passed and were signed into law.
  – Two states both introduced and passed legislation specifically requiring health information networks to support quality measurement activities.
The Intersection of Quality and IT: Now Seeing Some Convergence

- States and Regional Health Information Exchange Efforts: What Data is Being Exchanged?
  - Laboratory – 27%
  - Claims – 27%
  - Inpatient Episodes (Diagnoses, procedures, discharge summaries) – 23%
  - Outpatient Episodes – 21%
The Intersection of Quality and IT: Now Seeing Some Convergence

- States and Regional Health Information Exchange Efforts
  - 11% are currently providing quality performance reporting for purchasers and payers, and 57% plan to do so
  - 10% are currently providing quality improvement reporting for clinicians and 69% plan to do so
Why Do We Need IT for Quality?

• Bridges to Excellence data shows that real change occurs when you give actionable data to physicians within their practice
• Most of emerging performance measures require clinical data sets that are hard to get to
• Chart pulls just won’t work for small physician practices
• Most of the data required to not only deliver care within physician practices, but also measure quality, resides in silos across the health care system (hospital, lab, pharmacy, health plan, etc.)
The Opportunities That Lie Ahead

• Migrating to a more transparent system and incentives programs based on quality outcomes will be difficult.

• Multi-stakeholder health information exchange collaboratives that adhere to eHI’s principles build trust, through transparency, broad participation, and engagement of all the critical stakeholders.

• Policies for information sharing will be the most difficult issue to tackle – HIEs are creating a forum for consensus.

• Clinical data will be required to get there and it’s a mess out there….structures must be created to get at standardized clinical data.

• Leveraging health information exchange builds upon the system we use to deliver care….it doesn’t create a separate siloed system.
What We’re Doing About It

• Working closely with our multi-stakeholder membership: providers, payers, consumers, and vendors
• Developing common principles, policies…a Roadmap for improving the quality and safety of healthcare through incentives and HIT
• Disseminating to and actively supporting the states (we are working with 21 now) and our growing coalition of 280 state, regional and community-based collaboratives to drive healthcare transformation
Rapidly emerging interest in aligning quality improvement initiatives with the HIT and health information exchange infrastructure required
Key Take-Aways

• Health information technology is here and interoperability or health information exchange is the key area of focus
• Policies for quality and transparency...and aligning requirements and payment with them, are rapidly emerging
• National standards are emerging to support both interoperability and quality improvement and performance reporting
Key Take-aways

• We won’t get there effectively and efficiently with current systems
• State, regional and community-based collaborative models, which engage all stakeholders….and build trust, and build the foundation for a higher quality, safer, more efficient healthcare system: let’s sync up those focused on HIT with those focused on quality
• We must align efforts around quality with HIT….the two go hand in hand…
What We’ll Hear About Today

• It Takes a Culture to Raise a Technology: the Invisible Human Infrastructure

• The Role Of Technology in Healthcare Quality Enhancement and Medical Error Reduction - The Experience of a Small Medical Practice

• Accountability, Value, and Sustainability: The Experience of an Integrated Physician Network

• Creative and Practical Solutions for Improving the Quality of Care through Health IT Adoption and Clinical Data Exchange

• Re-Engineering Medication Processes to Capitalize on Technology

• Century Healthcare: Executive IT Perspective
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