A Deeper Look at Health IT

Electronic Health Records and a Statewide Health Information Exchange

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**What is health IT?**

- **Electronic Health Records (EHRs):** Collects and stores relevant patient health information
  - **Goal 2:** Promote statewide deployment and use of electronic health records
- **Health Information Exchange (HIE):** Allows EHR data to be securely shared among a patient’s health care providers
  - **Goal 3:** Enable the electronic exchange of health information
A statewide health information exchange is a “hub”

Statewide Health Information Exchange

- Decentralized data storage
  - Master Patient Index
  - Record Locator Service
- Security Controls
  - Standards

Interfaces with multiple EHRs:
- e.g., Allscripts, eClinicalWorks, EHS, eMDS, McKesson, Greenway Medical Technologies

To enable the exchange of:
- Clinical summaries
- Medication history
- Lab results
- Public health reporting
- Immunization history
- Quality reporting

* Iowa HITREC Preferred Vendor List
Health IT assets
- University of Iowa Hospital and Clinics
- Broadlawns Medical Center
- Spencer Hospital
- Mercy Health Network – North Iowa
- Genesis Health System
- Iowa Health System and HealthNet Connect
- Iowa Communications Network - Iowa Rural Health Telecommunications Program

Baseline assessments
- Hospitals, Provider Practices, Home Health, Long-Term Care, Pharmacy, Laboratories, Radiology Centers
Where are we today?

- Ambulatory practices/clinics
  - Based on 313 responses to a 2010 provider assessment

- An electronic health record (EHR)
- Paper medical records/charts
- Computer-based system (scanning)
Where are we today?

- Hospitals
- *Based on 93 responses to a 2009 Iowa Hospital Association assessment*

- Entirely electronic health record system
- Combination of paper and electronic system
- Paper and no electronic system
Barriers to Health IT Adoption

*Based on Iowa e-Health’s 2010 Ambulatory Practices/Clinics Assessment*
Strategies to Overcome Barriers

- Communication and outreach
  - Education and training is critical

- Technical assistance for providers
  - Make informed decisions about the EHR options available
  - Disseminate lessons learned from other providers
  - Understand standardization and privacy and security requirements necessary for interoperability
  - Provided by: Iowa Regional Extension Center, Iowa e-Health, Iowa Medicaid, and others

- Provider incentives
  - Incentives available through Medicaid and Medicare for demonstrating “meaningful use” of health IT
### Excerpt of proposed meaningful use matrix:

<table>
<thead>
<tr>
<th>Health Outcomes Policy Priority</th>
<th>Care Goal</th>
<th>2011 Objective</th>
<th>2011 Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improve care coordination</td>
<td>Exchange meaningful clinical information among professional health care team</td>
<td>Exchange key clinical information among providers of care (e.g., problems, medications, allergies, test results)</td>
<td>Report 30-day readmission rate Percent of transitions in care for which summary care record is shared</td>
</tr>
</tbody>
</table>
Enabling Interoperability

- Decentralized data sharing (intra- and inter-state)

- **Key Elements:**
  - Standardization
  - Thorough testing, controlled pilots, and phased implementation
  - Broadband expansion and increased network connectivity
A consolidated, decentralized approach...

Mitigates the need for a point-point approach...
Next Steps

- Provider Adoption of EHRs
  - Iowa Regional Extension Center
  - “Meaningful use” incentives
- Business and Financial Sustainability Plan
- Formalized Governance
- Establishing Privacy and Security Policies
- Development of Technical Infrastructure and HIE Services
- Evaluation Plan
- Coordination across multiple ARRA-funded programs
  - Broadband, Workforce, Iowa Medicaid
- Communication and Outreach
**Planning**
Assessment, research, develop strategic and operational plan

**Foundational**
Infrastructure, policies, proofs of concept

**Pilot HIE**
Controlled, phased-in HIE functionality

**Operational HIE**
Routine HIE for providers, incremental addition of functionality and provider types

**Evaluation/Measurement**

**Timeline**

- **2009**
  - Planning: Assessment, research, develop strategic and operational plan

- **2010**
  - Foundational: Infrastructure, policies, proofs of concept
  - Pilot HIE: Controlled, phased-in HIE functionality

- **2011**
  - Operational HIE: Routine HIE for providers, incremental addition of functionality and provider types

- **2012**
  - First opportunity for provider incentive payments

- **2013**
  - Evaluation/Measurement
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