
Health Information Technology: A tool for optimizing health

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Goals for this session

- Learn how Oregon is ensuring the coordinated care model is optimized and supported by the right health information technology.
- Learn how health information technology
 - enables providers and care teams to share critical patient information,
 - allows CCOs and health systems to manage care across populations and ensure quality of care,
 - can be used by Oregonians to access their own health information and better engage in their care.

Health Information Technology

What does **Health IT** refer to?

- Technology that stores, retrieves, or shares health information and data
 - Hardware (computers, smart devices)
 - Software (computer programs, apps)
- Examples:
 - An electronic health record (EHR)
 - Data registry for clinical information (e.g., immunization registry)

Other Useful Definitions

- **Health Information Exchange (HIE)** – the electronic transfer of health information between two or more health IT systems
 - Sometimes HIE can also refer to an organization that provides this service
- **Interoperability** – the ability of different health IT systems to communicate and exchange data between them, and make use of that data

Vision of an “HIT-optimized” health care system

The vision for the State is a transformed health system where statewide HIT/HIE efforts ensures that all Oregonians have access to “HIT-optimized” health care.

Oregon HIT Business Plan Framework (2013-2017):

http://healthit.oregon.gov/Initiatives/Documents/HIT_Final_BusinessPlanFramework_2014-05-30.pdf

Goals for HIT-optimized health care:

- Providers have access to meaningful, timely, relevant and actionable patient information at the point of care.
 - Information is about the whole person – including physical, behavioral, social and other needs
- Systems (Health plans, CCOs, health systems and providers) have the ability to effectively and efficiently use aggregated clinical data for
 - quality improvement,
 - population management and
 - to incentivize value and outcomes.
- Individuals, and their families, have access to their clinical information and are able to use it as a tool to improve their health and engage with their providers.

How does Health IT support CCOs and the coordinated care model?

Selected characteristics of the coordinated care model:

- Care coordination, population management throughout the system
- Integration of physical, behavioral, oral health
- Accountability, quality improvement and metrics
- Alternative payment methodologies
- Patient engagement

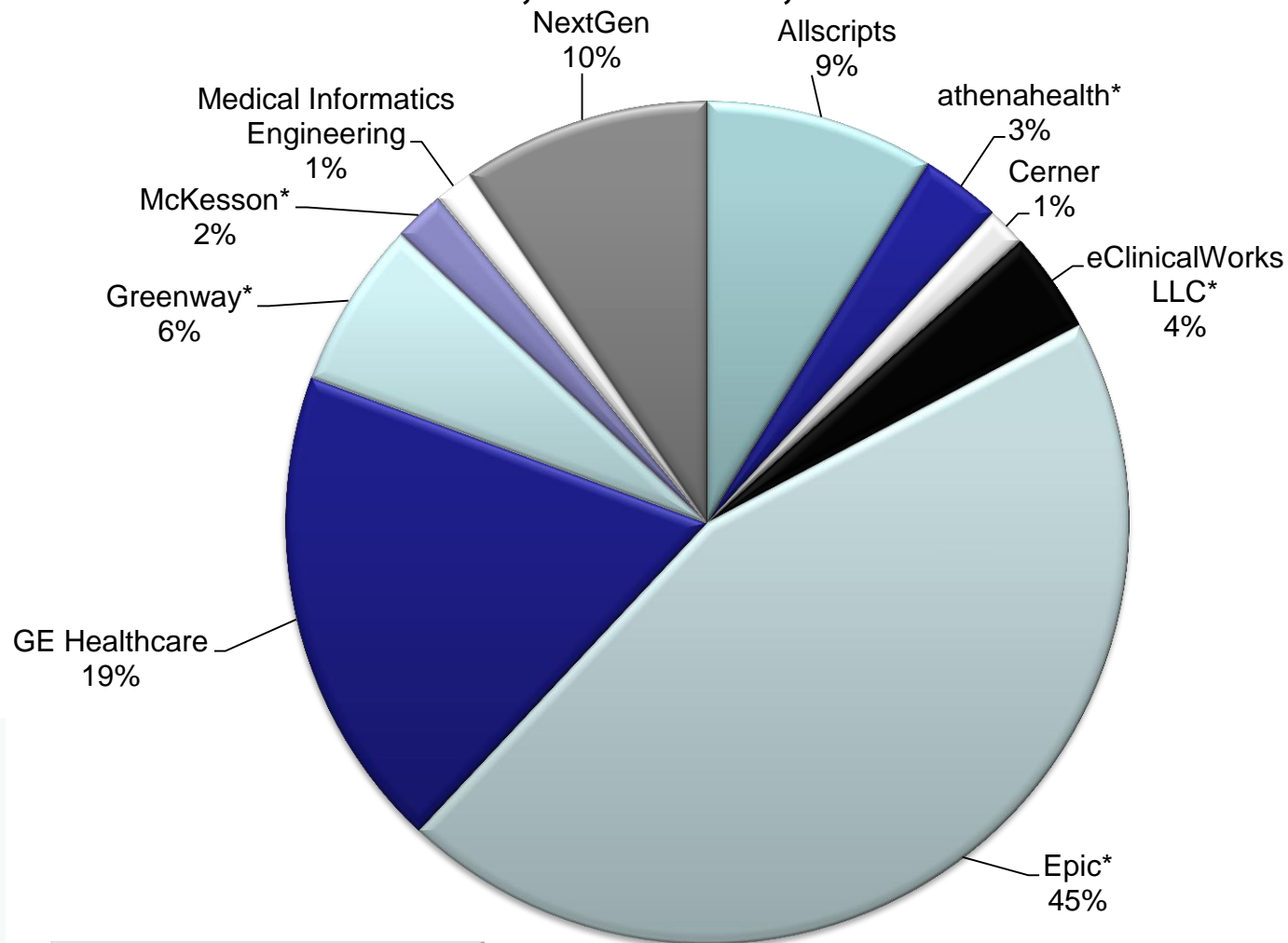
Coordinated care model relies on access to patient information and the Health IT infrastructure to share and analyze data

EHR Adoption and Meaningful Use in Oregon

- Oregon providers have been early adopters of EHR technology
- Currently, Oregon is in the top tier of states for providers receiving EHR incentive payments, with
 - more than \$300 million in federal funds coming to:
 - nearly all Oregon hospitals and
 - nearly 6,000 Oregon providers
- However,
 - More than 100 different EHRs are in use in Oregon
 - Many providers are not eligible for EHR incentives

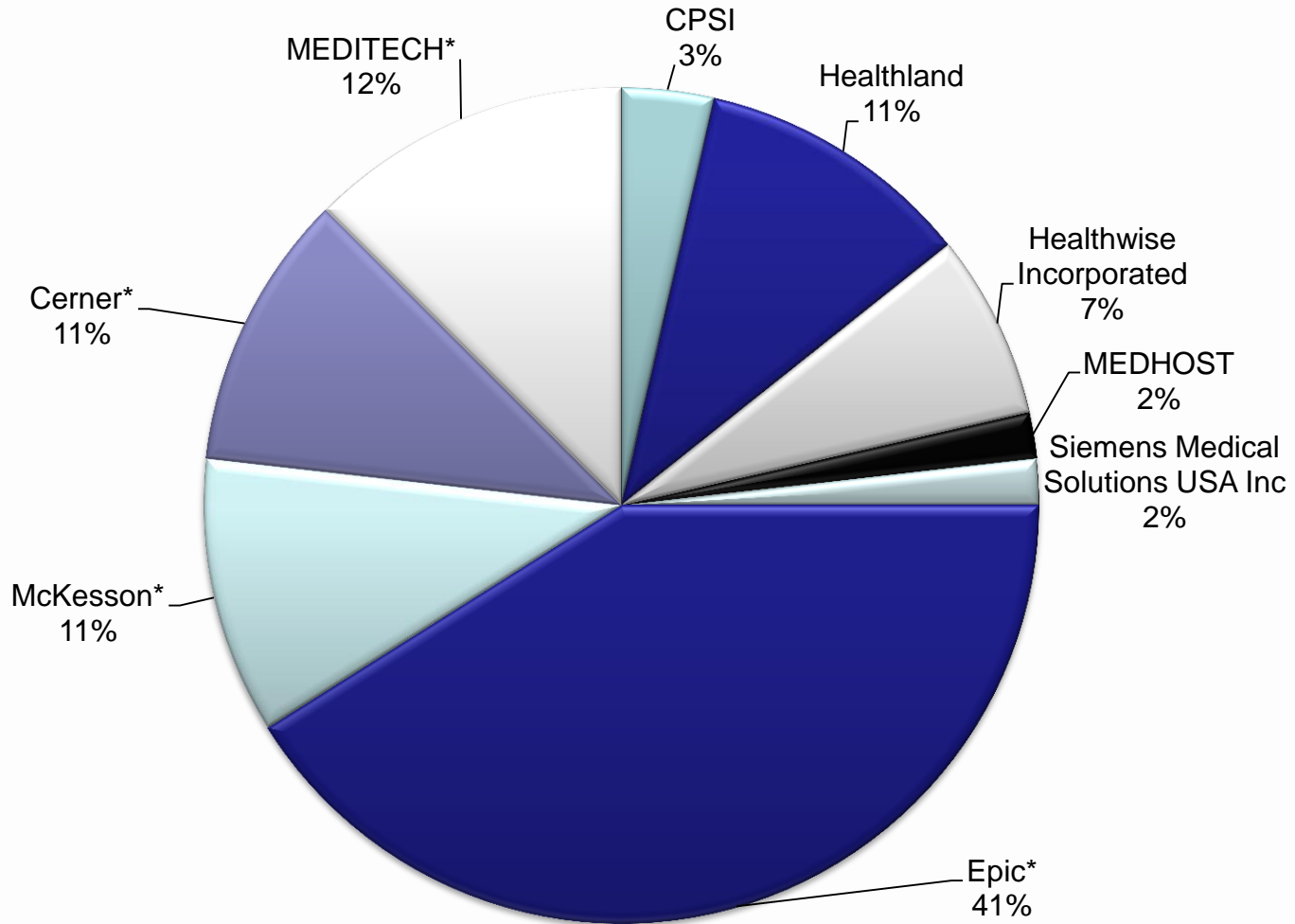
EHR Vendor Systems purchased by Oregon Eligible Professionals (top 10)

N=4,912 out of 6,007 total



* Denotes vendor also has 2014
CEHRT version in use

EHR Vendor Systems in use by Oregon Hospitals (56 out of 59 total hospitals)



* Denotes vendor also has 2014
CEHRT version in use

Count of unique hospitals, that received a payment in either the Medicare or Medicaid EHR Incentive Programs from 2011 – Aug 2014

Health Information Exchange in Oregon

- Several community HIEs:
 - Gorge Health Connect – mid-Columbia River Gorge region
 - Jefferson HIE – Southern Oregon
 - Central Oregon HIE – Central Oregon
 - Coos Bay, Corvallis, others in development
- Epic Care Everywhere
 - Functionality for viewing among participating Epic users
- Direct secure messaging within EHRs is beginning
 - CareAccord, Oregon's statewide HIE
- Other organizational efforts by CCOs, health plans, health systems, independent physician associations, and others
 - including HIE and HIT tools, hosted EHRs, etc. that support sharing information across users

HIT/HIE exists in Oregon, but gaps remain

Many providers, plans, and patients do not have the HIT/HIE tools available to support a transformed health care system, including new expectations for care coordination, accountability, quality improvement, and new models of payment.

State-Level Health IT Services

- Why provide some health IT services at the state-level?
 - Connecting and supporting local HIT efforts across the state
 - Administrative simplification and efficiencies where multiple systems would be duplicative and burdensome
 - Fill gaps where there are no services available
- Services for sharing health information to support care coordination
- Foundational HIT services to support HIE and organizations using aggregated health data

Statewide Hospital Notifications, EDIE

- ▶ Hospital notifications systems (2015)
 - ▶ Provide real-time alerts to providers and the care team when their patient has a hospital event (emergency department, inpatient, discharge)
 - ▶ Subscribers can only access information for their patients—CCOs, health plans, providers, HIEs, etc.
- ▶ Emergency Department Information Exchange (EDIE)
 - ▶ Identify frequent users of emergency department care
 - ▶ Provide ED care history, treatment plans for frequent ED users
 - ▶ 54 of 59 Oregon hospitals are using EDIE today

For more information on Oregon's HIT/HIE developments, please
visit us at <http://healthit.oregon.gov>

CareAccord, Oregon's state HIE:
www.careaccord.org

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