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.

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
Count of unique providers that received a payment in either the Medicare or Medicaid EHR Incentive Programs from 2011 – August 2014.
EHR Vendor Systems in use by Oregon Hospitals
(56 out of 59 total hospitals)

- Epic* 41%
- McKesson* 11%
- Cerner* 11%
- MEDITECH* 12%
- Healthland 11%
- Healthwise Incorporated 7%
- MEDHOST 2%
- Siemens Medical Solutions USA Inc 2%
- CPSI 3%

* 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
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

http://www.orhealthleadershipcouncil.org/our-current-initiatives/emergency-department-information-exchange-edie
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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