

# THE TECHNOLOGY TO POWER EHRs AND HIEs



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Health IT 11  
The Tools for Meaningful and  
Accountable Care

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# Meaningful First, Then Accountable

- First things first – the Top 10 Challenges to achieving meaningful use\*

## Hospitals

1. Doing CPOE right the first time
2. Helping physicians transition to competent, willing users of the EHR
3. Integrating the right clinical decision support into CPOE
4. Starting the record in the Emergency Dept.
5. Managing new types of electronic information
6. Capturing the data for quality performance measurement
7. Bringing clinical data analytics up to par
8. Sharing data with patients and other providers electronically
9. Meeting new requirements for privacy and security
10. Dealing with ICD-10 at the same time

## Eligible Professionals

1. Capturing the data
2. Establishing effective workflows to reinforce data entry (including medication reconciliation)
3. Driving provider involvement in adopting the EHR
4. Implementing appropriate CPOE
5. E-prescribing – as soon as possible
6. Developing a process for managing clinical decision support
7. Implementing patient health information exchange workflows
8. Formulating a provider health information exchange strategy
9. Ensuring privacy and security compliance
10. Initiating EHR-based quality performance measurement

\* From CSC white papers, 2010, available at [http://www.csc.com/health\\_services/insights/](http://www.csc.com/health_services/insights/)

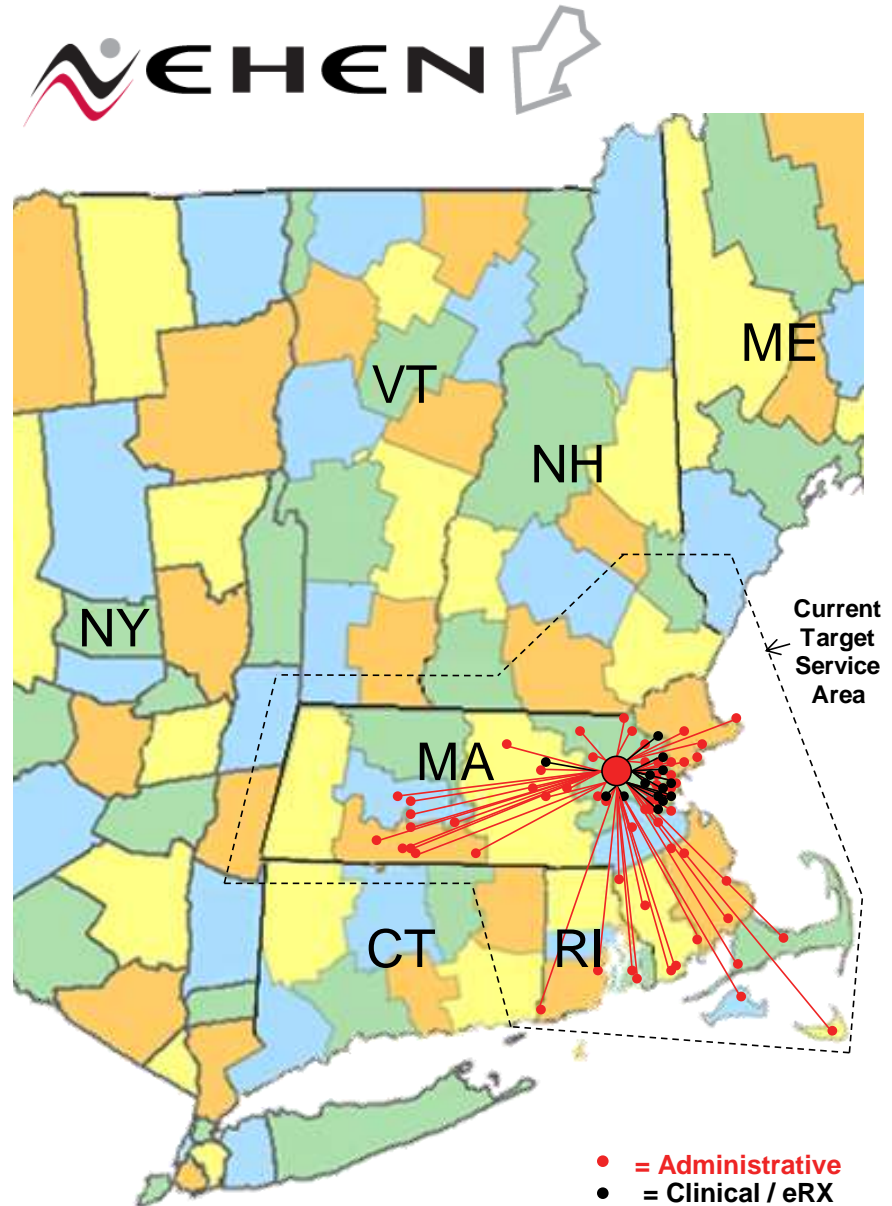
**First you need to have an EHR and then you need to address a number of daunting challenges: Certification ≠ Meaningful Use.**

# Supporting Meaningful Use with HIE

- The various meaningful use requirements and specifications can be boiled down to 11 essential use cases for health information exchange in healthcare operations and patient care
  1. Route visit data to other providers and authorized parties
  2. Route data in support of care transitions, including referrals
  3. Route lab and imaging orders and results
  4. Query patient history
  5. Route electronic prescriptions
  6. Retrieve medication history for medication reconciliation and other medication management
  7. Route visit and other data for clinical decision support
  8. Route data to patients and enable ownership and management
  9. Adjudicate and manage claims and/or patient responsibility
  10. Route visit and other data for standardized quality reporting
  11. Route visit and other data for standardized public health reporting

# Local HIE in Massachusetts

- NEHEN is the most widely-adopted HIE solution in New England
  - Spanning the Massachusetts and Rhode Island
  - Longest sustained and most widely scaled
    - 100M+ annual transactions
  - Managed by CSC
- Serving organizations of all types and size, public and private
  - Federated and hosted options
- Expanding clinical HIE
- Aligned with state and interstate HIE
  - Provider directory, NHIN Direct, etc.
  - Well-positioned for regional expansion



# NEHEN Clinical HIE Today – Driven by Meaningful Use

## Supported Services

NEHEN Administrative Exchange

NEHEN Clinical Data Exchange

NEHEN e-Prescribing Exchange

## Clinical Exchange Features/Functions

Provider-to-Provider Clinical Summary Exchange  
Clinical Summary Supporting Multiple Use Cases (e.g., Discharge Summary, Visit/Encounter Summary, Referral Summary, Admission Notification)

Provider-to-Payer Exchange  
Clinical Summary for Case Management & other Use Cases  
Lab Results for Quality Measurement & other Use Cases

Quality Reporting  
Clinical Summary for Quality Analysis

Public Health Reporting  
Clinical Summary for Health Equities Analysis  
Lab Results  
Immunizations  
Syndromic Surveillance

Clinical Summary Viewer  
Built into NEHENExpress

Community Participant/Provider Directory for Message Routing  
Centrally hosted by NEHEN

Secure Messaging

Audit Control  
Reportable Event Logging  
NEHENExpress Audit Report Viewer

Use Cases

Enabling Technologies

# NEHEN's Clinical Exchange Services / Adoption

Participant	Clinical Summaries <sup>1</sup>		Lab Results <sup>2</sup>		Immunizations <sup>3</sup>		Syndromic Surveillance <sup>4</sup>	
	Send	Receive	Send	Receive	Send	Receive	Send	Receive
Atrius Health	Planned						Planned	
Beth Israel Deaconess	✓	✓						
BI Deaconess – Needham								
Children's Hospital	✓	✓			Planned			
Fallon Clinic					Planned			
Mount Auburn Hospital								
Mass. Eye & Ear Infirmery	Planned	Planned						
New England Baptist		Planned						
Northeast Health System		✓						
Partners HealthCare	Planned							
Signature Health	Planned	Planned						
Tufts Medical Center								
Winchester Hospital	Planned	Planned						
Boston Public Health Comm.		5				Planned		
Mass. Dept. of Public Health				Planned				
Mass. eHealth Collaborative		6						
Neighborhood Health Plan								
Network Health								
Tufts Health Plan								

<sup>1</sup> HL7 CDA R2 CCD, HITSP C32

<sup>2</sup> HL7 2.5.1, LOINC

<sup>3</sup> HL7 2.5.1, CVX (as specified by CDC)

<sup>4</sup> HL7 2.5.1

<sup>5</sup> For health equities analysis

<sup>6</sup> For quality measurement and reporting

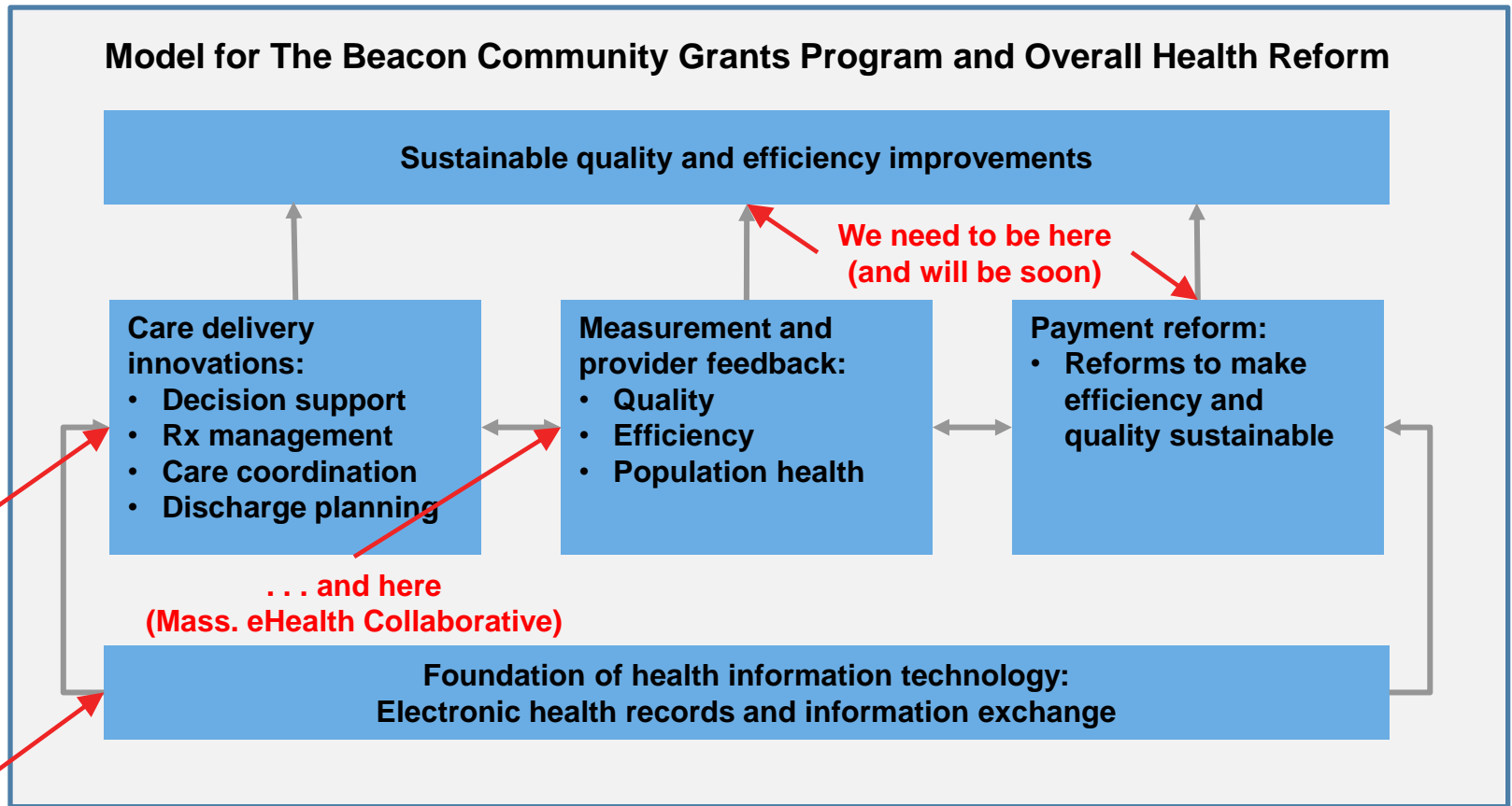
**Legend:**

✓ Production

Testing

In design / development

# Next Up – Accountable Care



Source: Health Information Technology: Laying The Infrastructure For National Health Reform, Blumenthal et al, *Health Affairs*, June 2010

**Beyond the foundational capabilities of today's HIE/HIT, accountable care will require inline clinical decision support, data aggregation and business intelligence for retrospective analysis, expanded patient engagement and a greater emphasis on and availability of mobile apps.**



THANK YOU



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