Implications for Health Information Exchange – MetroChicago
Purpose:
Develop a **HIE for the Greater Metro Chicago**, meeting stakeholders needs while achieving regional and state-wide collaboration

Vision:
Achieve a **sustainable value-driven HIE**, that **exchanges secure health information of each person**, facilitates **patient-centered care among providers**, and supports the **management of population health**

Strategy:
Engage active stakeholder collaboration and a regional team approach to successfully plan a unified HIE
Accomplishments in 2010

- Advisory Board with Broad Stakeholder Engagement
- Worked closely with State of Illinois
- Strategic Business Plan and a HIE Model
  - Initial Use Cases and a Architectural Model
  - Impact Analysis and Financial Model
  - Communication and Marketing Plan framework
- Letters of Intent
- Vendor Selection Process: Final Two
- Stakeholder Commitment
Initial Functionality Driving Benefits

Top 5 Considerations

• Diagnostic results delivery
• CCR/CCD Exchange
• Medication/Allergy History
• ED Linking/Clinical Summary
• Registry State Reporting (Immunizations)

HIE Foundation (Core) Services

• Patient Identity Management
• Patient Consent Management
• Record Locator Service
• Provider Directory

➢ Software as a Service
➢ Hybrid Approach
Looking Forward 2011

- Implementation Planning
- Stand Up HIE
- Early adopters live; follow with cohort of hospitals
- Participation Agreements
- Support Direct Project with Office of Health Information Technology
- Support Public Health Initiatives
- Go with initial Use Cases that:
  - Get up and running fast
  - Has the most impact
  - Touches the most people/entities
HIE Implications

Healthcare Outcomes

- Improve Care
- Improve Population Health
- Reduce Costs

Value

Stakeholders
Vanderbilt Center for Better Health

A **community** emphasis requires a **new organizational framework** focused on the **individual/patient** and requiring the **participation of all providers of care** for that individual.

- **Identity**: Who is Dr. X? Who is Patient Y?
- **Authority**: Can Dr. X see my records?
- **Standards**: Can systems talk to one another?
- **Certification**: Do EHR systems use the best available standards?
- **Quality**: Am I getting the care I need?
- **Legal**: Am I protected...HIPAA...Consent?
Challenges and Issues

- Reaching all stakeholders
- Answering fundamental questions
- Understanding the differences between HIE and EHR
- Funding and Shared Value
- MU and Accountable Care
Ten Things You should know about HIE

10. Critical mass of health care organizations participating is key for consumers/patients and their families to manage their health and information with their providers.

9. Stakeholders expand beyond traditional healthcare providers.

8. There is value and ROI in exchanging information;

7. It’s also about workflow!

6. Getting ready to participate will involve current EMR *use, interoperability standards, privacy and security, and end-user engagement.

   * Recognize need to provide access to those without EMR
Ten Things You should know about HIE

5. It’s not if, but when, organizations need to participate in HIE. Cannot meet meaningful use criteria for 2015, without it!

4. HIE, Meaningful Use, Regional Extension Centers and Workforce Development are highly interdependent!

3. Secure information exchange needs to occur across institutional and business boundaries

2. Focus on health outcomes, not technology!
"By focusing on meaningful use....better healthcare does not come solely from the adoption of technology itself, but through the exchange and use of health information to best inform clinical decisions at the point of care”

Dr. David Blumenthal, October 2009
Terri Jacobsen, RN, MS, FHIMSS
Director
MetroChicago HIE
tjacobse@mchc.com

Thank You!