

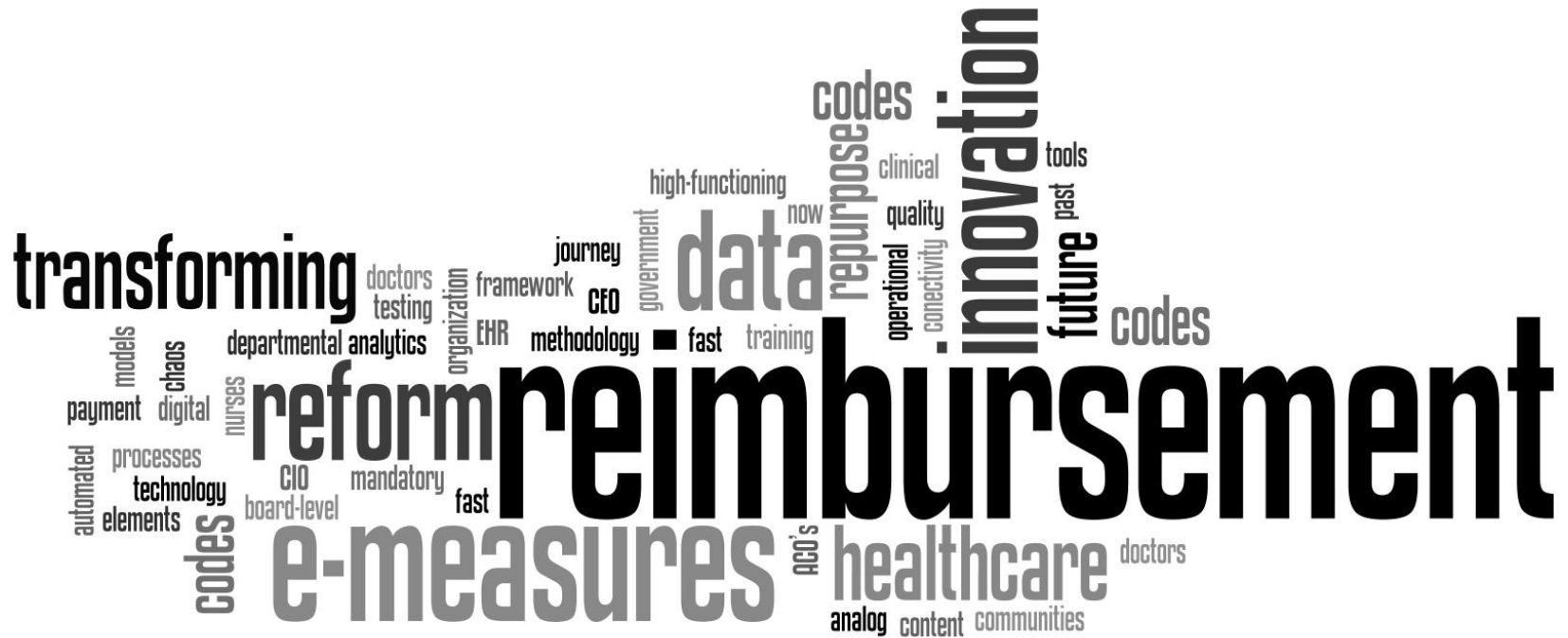


EHR Implications to Emergency Management

Presentation to MADRA

June 7, 2012

Changes in reimbursement are driving the move to Electronic Health Records...



...the transformation – though very much needed – is complex, costly, and risky.

Folks, we have a needle mover!



Health Information Technology (HIT)...

- A wide range of computerized tools used in health care
- Examples:
 - Electronic Health and Medical Records (EHR/EMR)
 - Electronic prescriptions
 - Health Information Exchange (HIE) – sharing clinical & administrative information electronically

President Obama's National Health IT (HIT) Agenda...

- Nationwide Health Information Network (NHIN)
- HIEs
- Sets new direction that greatly expands roles of states in fostering HIE and EHR adoption
- “Meaningful Use” – sets 2014 goal to increase the number of providers using EHR
- Provides for financial incentives, education, training and state led actions

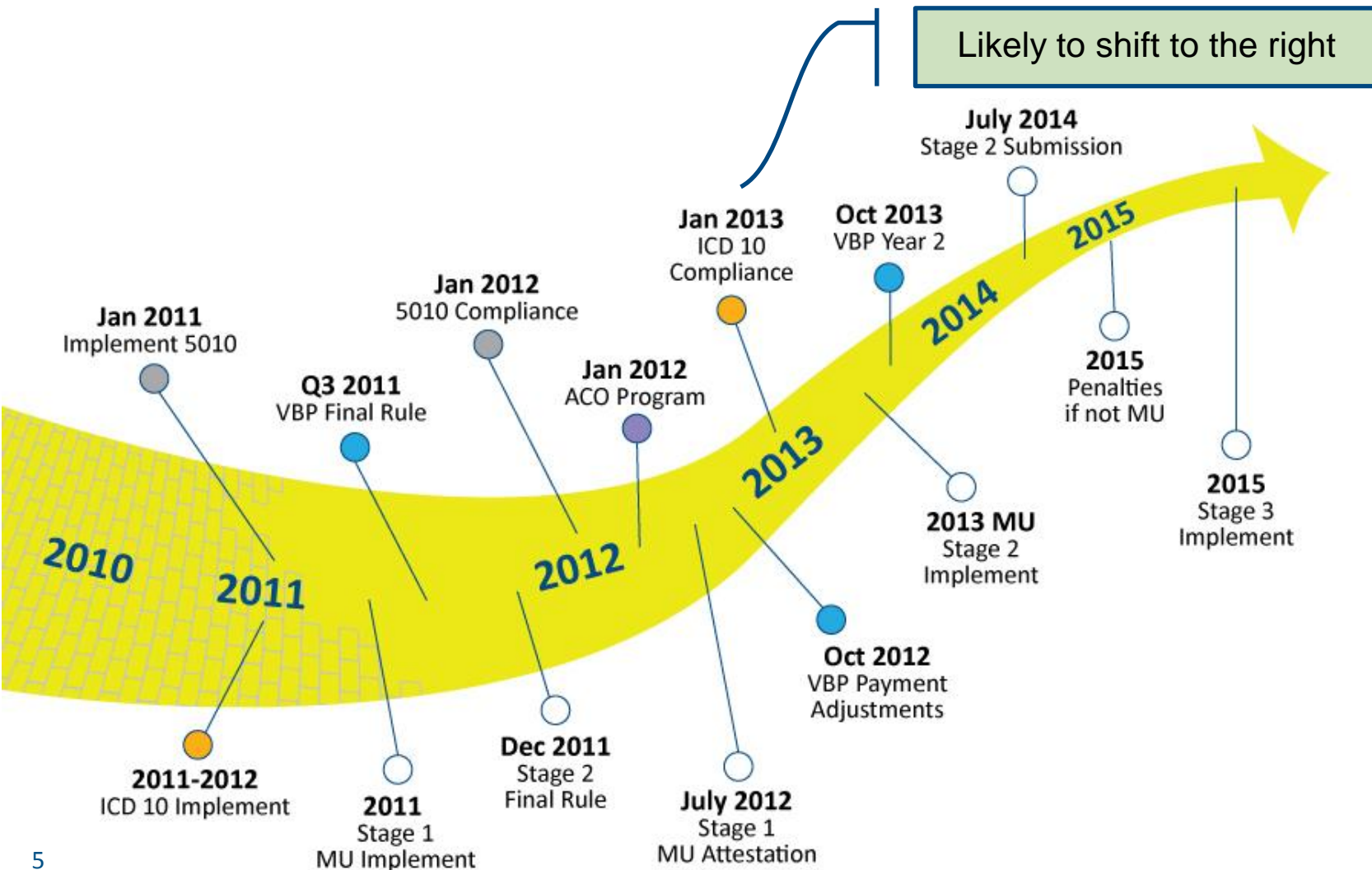
The HITECH Act...

- Greatly expands roles of states in fostering HIE and adoption of EHR
- “Meaningful Use” – sets 2014 goal to increase the number of providers using EHR
- Provides for financial incentives, education, training and state led actions

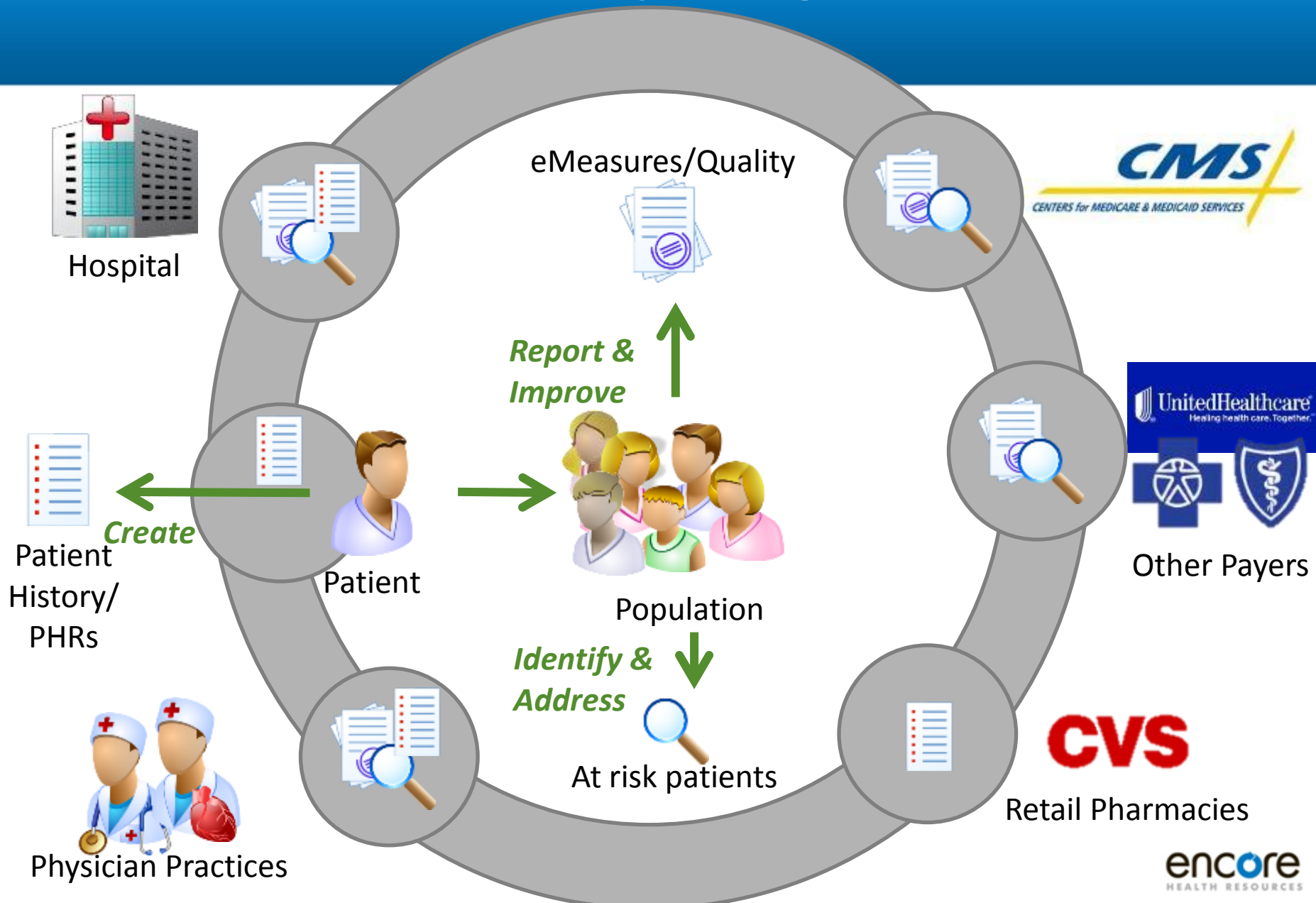
The goals of HIT programs – though controversial and political – are intended to improve the Healthcare industry.

- Improve the quality of care
- Increase patient safety
- Reduce medical errors
- Enhance access to patient information
- Reduce healthcare costs
- Provide positive state-level impact
 - Improve care of children
 - Create jobs
 - Leverage non-profits

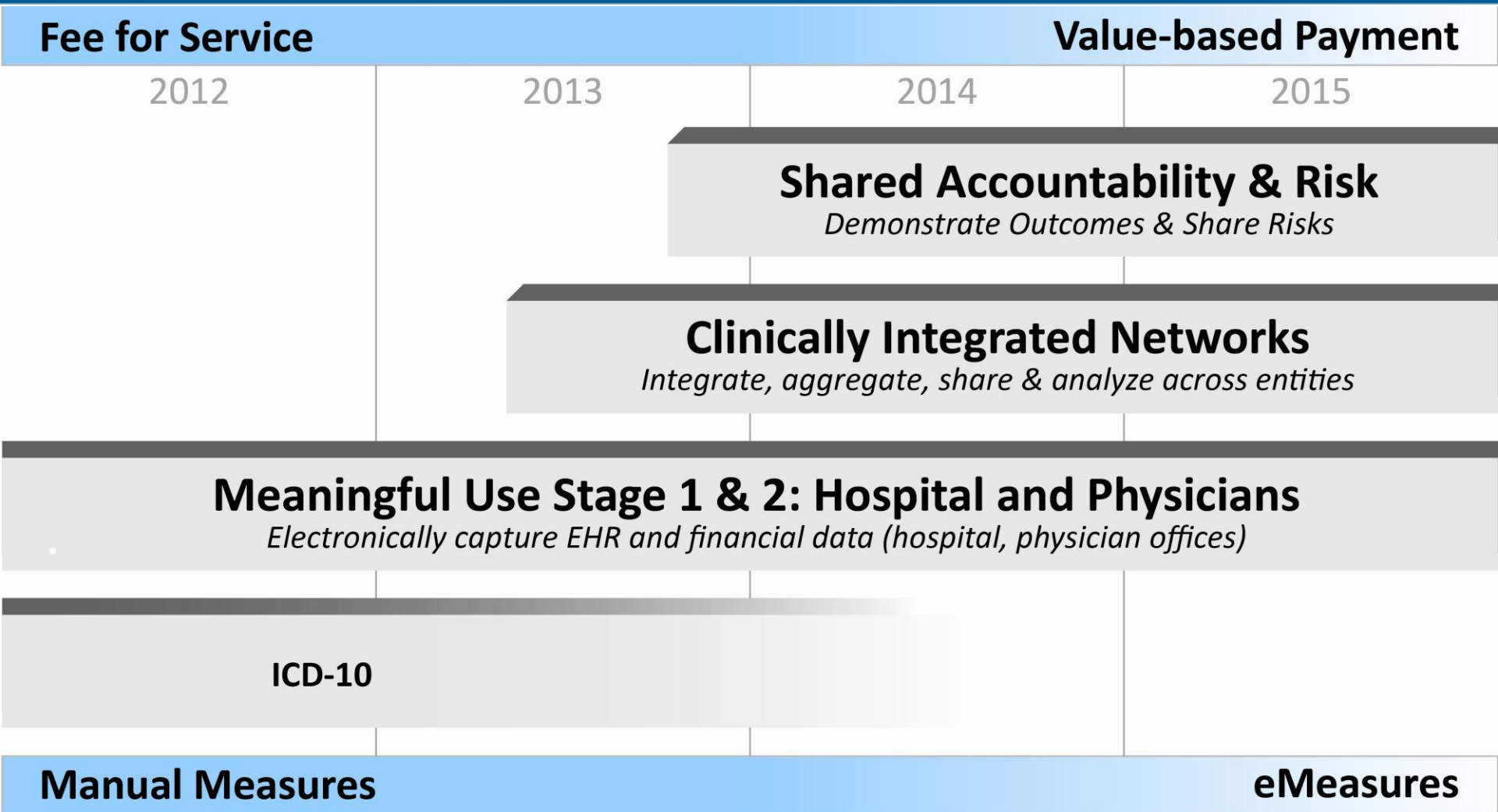
HIT regulations are setting the direction in the near term and into the future...



The Vision: Clinically Integrated Network



The transition to improved patient outcomes requires new levels of inter- and intra- collaboration and data sharing.



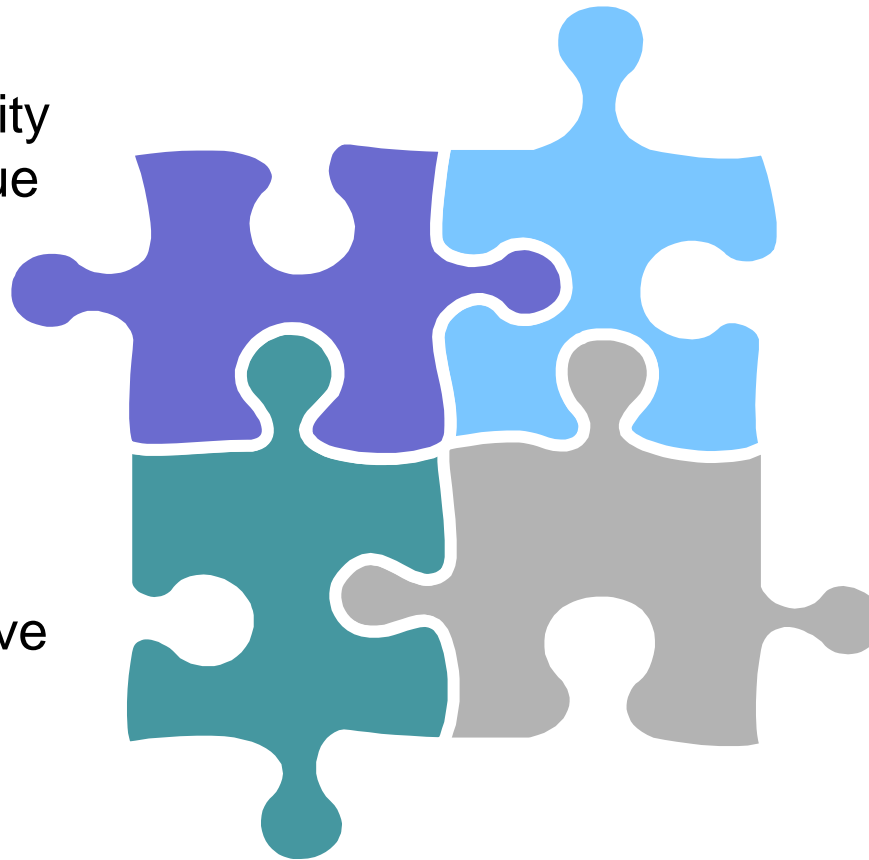
Today, very few organizations have fully realized this vision due to its complexity and cost.

Finance

- Control cost
- Ensure quality
- Build revenue
- Lower risk

Enhanced IT Systems

- Clinical
- Administrative
- Financial
- User acceptance



Transformation

- System integration
- Stakeholder acceptance
- Legal implications

Enterprise-wide Agility

- Fluid environment
- Changing requirements
- Operational performance
- Care coordination needs

This transitional state Introduces additional complexity in Emergency Management.

- Many sources of data, each of which can cause a point of failure
 - Typically local
 - Multiple provider records
 - Paper still in play
- EHRs are not “plug and play,” even if they are from the same vendor
- Data exists both in systems and between systems
- When patients move, data does not always follow
- Any point of the “to be” CIN can be damaged or destroyed

What happens if...



Electronic Health Records in Emergency Management: A Best Case Scenario

Electronic Health Records Prove to be Invaluable After Crisis

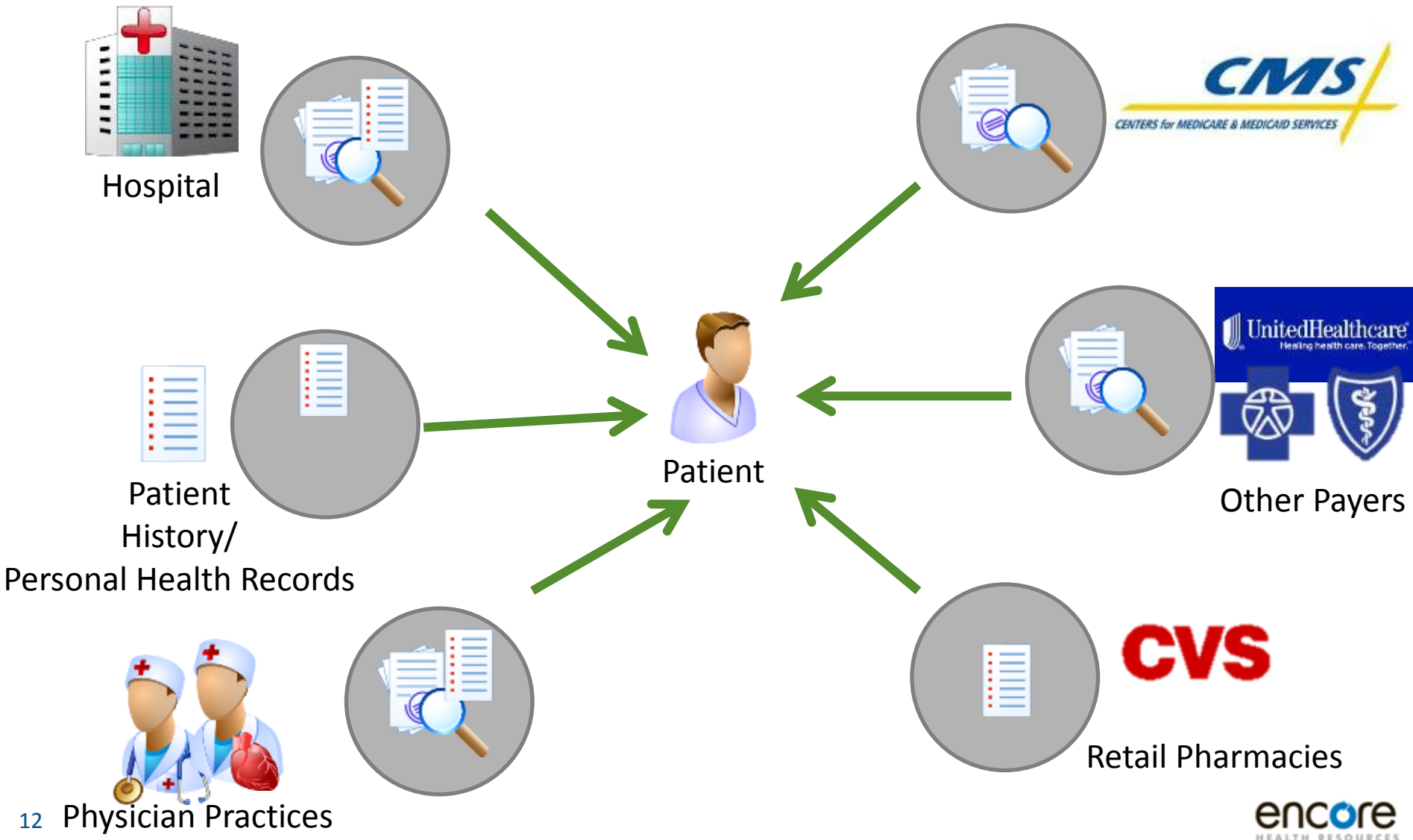
On May 22, 2011 a devastating tornado struck Joplin, Mo., killing 134. As in all disasters, there were important lessons – not least, that nature will continue to inflict catastrophes unpredictably and in many forms.

In terms of health care, another lesson was repeated. The Joplin tornado proved once again the resilience and security afforded by hospitals and providers transitioning from paper to electronic health records (EHRs). **Three weeks** before the storm, St. Johns transitioned to an EHR system.

The aftermath of the storm highlighted a major difference between paper records and EHRs. Paper records and x-rays were lost. The paper records still in the hospital on May 22 were literally blown to the winds. Some records had been found as far as 75 miles away in Springfield.

Yet just six days after the tornado, the hospital staff was at work again in a new temporary mobile medical unit (purchased in part, coincidentally, with HHS hospital preparedness program funds). They were delivering care with full access to their electronic patient records.

With one Healthcare consumer, there are many sources of data and many points of failure...and transitioning to the CIN vision.



Many healthcare organizations are still moving away from paper and are in a transitional state. How will this affect EM plans?



Hospitals

87% use Electronic Health Records (EHRs) in 2012

Source: <http://www.optuminsight.com/news-events/press-releases/2012/feb-16-2012>

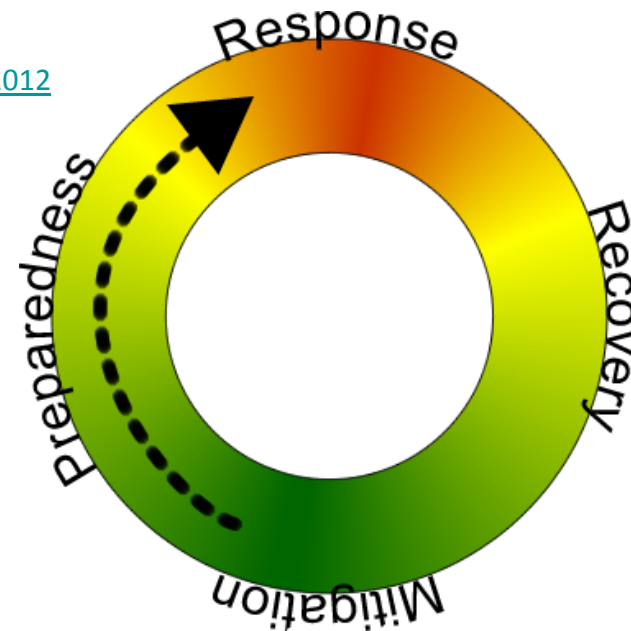


Physician Practices

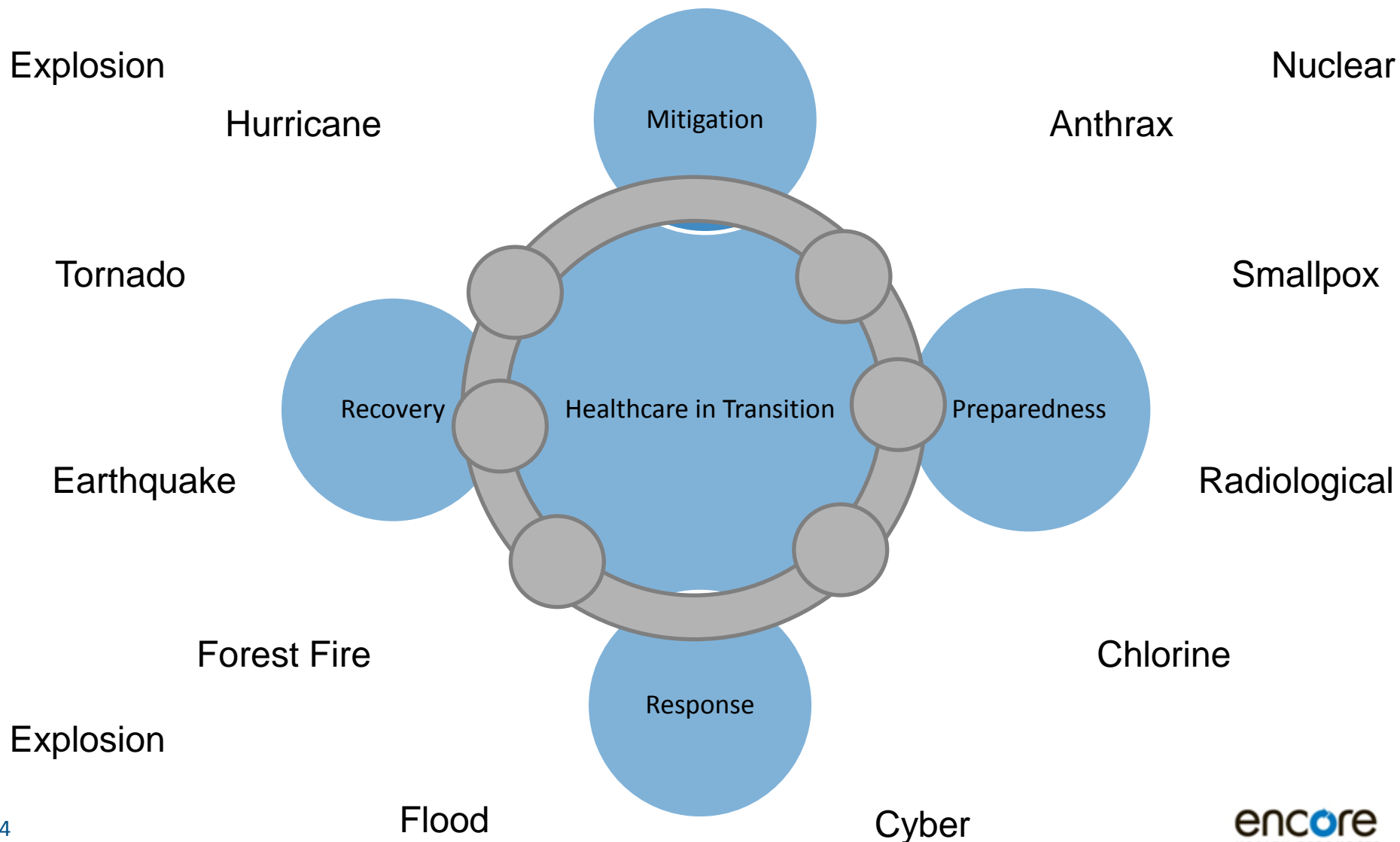
40.4% use EHRs in 2011

Up from 38.7% in 2010

Source: <http://www.ama-assn.org/amednews/2011/11/07/bil21107.htm>



Until the full vision of HIT is realized, each EM phase must include provisions for incongruent patient data and risk mitigation.



Summary

- The Healthcare industry is evolving and transitioning to a fully realized vision of integrated health data.
- Each region and each organization is at a different point along the path of transition.
- Health data still on paper in some areas while in EHRs in others.
- EM plans need to incorporate additional mitigation strategies in regions where the transition has not yet been completed.

THANK YOU

