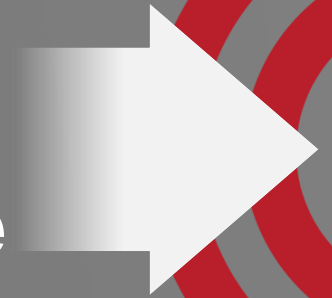


# Health Information Exchanges: Critical Success Factors & Role in Patient-centered Accountable Care



HIMSS Payer Roundtable

October 20, 2011



**POINT-OF-CARE PARTNERS**  
HIT Strategy & Management Consultants

# Session Objectives



- ▶ Analyze the role of HIEs in supporting Accountable Care Organizations and their Patient-centered Medical Home nucleus
- ▶ Construct a framework of factors critical to the long-term success a health information exchange organization
- ▶ Review key business model elements common to successful HIEs
- ▶ Discuss application of these factors to evaluate prospective HIE partners and guide business planning for new HIE organizations

# Evolving to Accountable Health Care – with a Patient-centered Medical Home Nucleus



## Accountable Care Organization

### **Clinical Integration**

- Medical staff alignment
- Coordination of PCP, specialist, other provider relationships
- Shared clinical guidelines

### **Population Health Management**

- Define patient populations
- Identify high-risk segments
- Proactive patient outreach
- Detect gaps in care
- Manage full continuum of care

### **Financial Management:**

- Infrastructure & skills for management of financial risk
- Accountable for overall costs
- PCP/SCP incentive programs
- Payment systems

### **Quality Management**

- Patient & Provider satisfaction assessment
- Quality measurement
- Quality reporting

## Medical Group & Health Care System Enterprise Level Activities

Manage complete continuum of care

Resources & Support for patient self-management

Multi-payer management

Post Discharge Follow-Up Programs

Urgent Care Management  
ER Avoidance Programs

Transition of Care

Behavioral & Mental Health

Care management

Acute  
Chronic  
Inpatient  
SNF

Hospitalists

## Patient-Centered Medical Home

- Enhance care access
- Patient-centered care model
- Physician-led care team
- Enhance coordination of care
- Point of care analytics & clinical decision support
- Detect gaps in care
- Manage utilization & eliminate waste
- Demonstrate quality & safety
- Activate patients

### Patient & Family

- Patient Portal
- Patient Engagement
- Patient Activation

**“Numerous health plan – provider ACOs are emerging with performance goals & promising results” –**

K. Ignani, AHIP

**“ACOs are the future business model for provider/plan collaboration” –**

L. Reisman, Aetna

# Essential Elements of an HIT Infrastructure to Support Patient-Centered Accountable Care



## Goals

**Accurate & Efficient Population Health Management**

**Proactive care management**

**High performance quality management**

## HIE-enabled EHR Capabilities

### ***Patient Registries:***

- Assess patients health risks
- Identify gaps in care prior to scheduled visits & for those needing outreach

### ***Clinical decision support:***

- At the point of care
- Accurate and actionable care guidelines

### ***Continuity of care profile:***

- Patient care across all providers

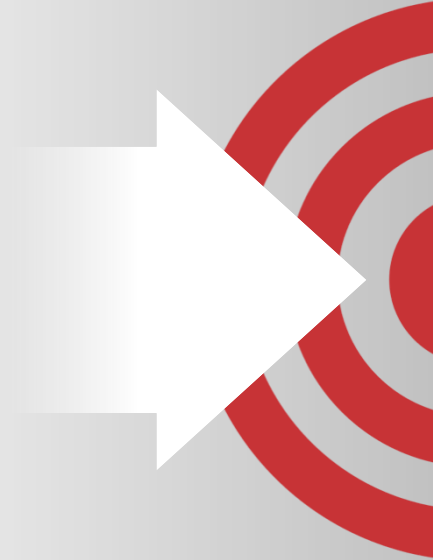
### ***Secure clinician messaging & referral management***

### ***Quality Management Reporting:***

- Disease-specific Dashboards
- Comparative analysis (time, populations, physician community)

**Community-wide Electronic Health Record with feeds from Healthcare Providers & Health Plans**

# Health Information Exchanges: Critical Success Factors



# A Four-factor Framework for Success



1. ***Shared Vision*** among stakeholders
2. Principal funding for business development and operations from ***Private Sources***
3. ***Physician Engagement*** at all levels of the organization
4. A portfolio strategy that goes beyond transaction services to encompass ***analytics*** and ***value-added applications***

***Growing number of HIEs demonstrating sustained growth and financial viability provides evidence to support an empirically-based framework of critical success factors***

# 1. Shared Vision among Stakeholders



- Deep commitment to a shared vision:
  - Leadership willing and able to make the investment; visioning involving diverse stakeholders is hard work and never-ending
  - Drives incremental “waves” of narrow sets of service priorities delivering tangible value to every stakeholder
  - Fosters “co-opetition”
- Shared vision is the cornerstone to innovation
  - Essential in the nascent HIE market

## Inland Northwest Health Services

- Formed by two competing health systems
- Shared belief of significant cost savings by combining health information infrastructures to provide a community-wide health record

Source: NeHC Report, 2011



“Shared vision fosters risk-taking and experimentation” – Peter Senge

## 2. Principal Funding from Private Sources



- ▶ Receiving start-up funding from participants a predictor of financial viability
  - Participants with financial “skin in the game” motivated to help make the HIE successful
  - Funding typically tied to specific goals supported the shared vision and performance milestones
  - Sets the stage for fees-based services
  
- ▶ Avoids pitfalls of relying on grants and government funds
  - Conditions for funding may distract HIE management from strategic priorities of stakeholders
  - Arbitrary end dates don’t reflect realities of business development



National **eHealth**  
Collaborative

**SECRETS OF HIE SUCCESS REVEALED**  
Lessons from the Leaders



**Characteristics associated with Regional Health Information Organization viability**  
Adler-Milstein, Landefeld, Jha



### 3. Physician Engagement at All Levels



- ▶ Physicians at the center of the HIE's growth dynamics
  - The more physicians are using the HIE to share health information, the more useful it becomes
- ▶ Leverage local medical societies, independent practice associations and community relationships to gain the commitment of the community's physicians
- ▶ HIEs with extensive physician involvement tend to have more EHR adoption



Taconic (NY) IPA and North Texas Specialty Physicians IPA are leaders in forming HIEs in their communities. In addition to providing financial resources, these IPAs contribute expertise in practice operations, clinical workflow, healthcare quality and safety needs – NeHC report, 2011

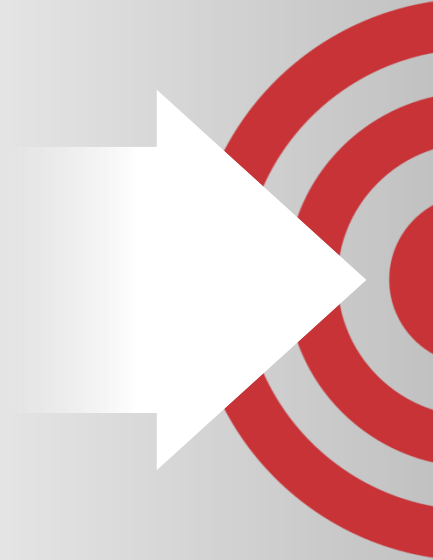
## 4. Portfolio of Services = Transactions + Analytics + Value-added applications



- ▶ Successful HIEs have baked into their shared visions and architecture strategies the evolution from a data exchange service to an application solutions provider
  - Long-term sustainability depends on a portfolio generating multiple revenue streams
  - Exchange services will rapidly become a commodity
  
- ▶ With the right system architecture, a community-wide EHR supported by HIE-based applications is a valuable asset
  - Positions the innovative HIE enterprise to provide applications needed for patient-centered accountable care, and not effectively supported by EMR systems, e.g.,
    - Population health management, including detecting gaps in care, disease registries, adherence management
    - Care transition support, especially medication reconciliation
    - Quality reporting – prospective, point of care, and retrospective

HIE must have a shared vision and strong brand as a trusted, neutral entity to support building the data repositories needed for these applications.  
A federated architecture won't work!

# Framework of Critical Success Factors

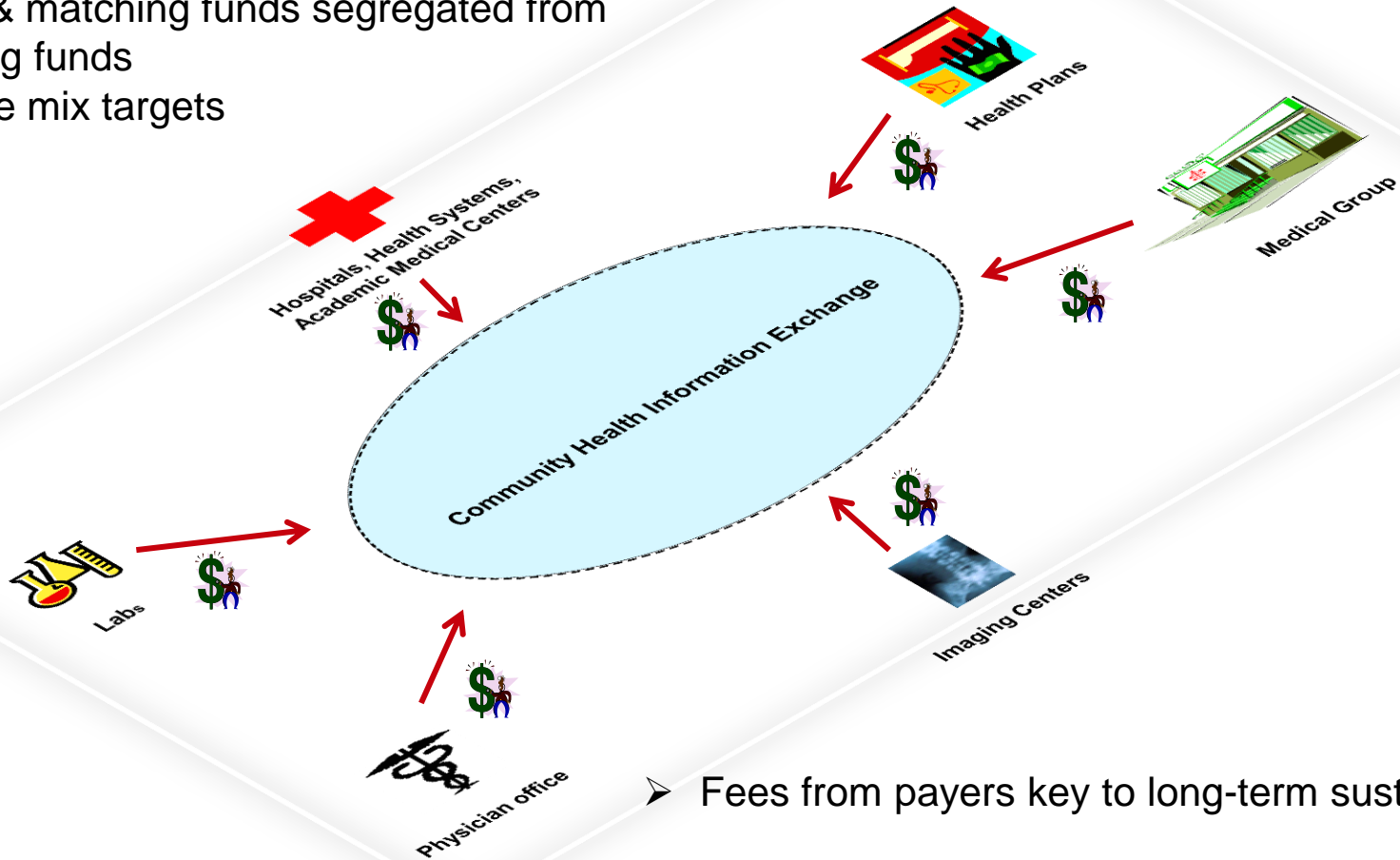


**More to come as information flows**

# Essential Elements of a Winning Business Model



- Subscription fees from all participants
- Grants & matching funds segregated from operating funds
- Revenue mix targets



➤ Fees from payers key to long-term sustainability

# Discussion Questions



- ▶ Are health information exchanges critical to the success of patient-centered accountable care organizations?
  - If yes, what is needed for payers to engage?
  - If no, what's the alternative?
  
- ▶ Does the *Framework of Critical Success Factors* provide a basis for business planning and evaluating the future outlook of an HIE?
  - What's missing?



## SECRETS OF HIE SUCCESS REVEALED

Lessons from the Leaders

National eHealth Collaborative (2011). Secrets of HIE success revealed: Lessons from the leaders. Available at: <http://nationalehealth.org/SecretsofHIESuccessRevealed.pdf>

Adler-Milstein et al. (2011, May). A survey of health information exchange organizations in the United States: Implications for meaningful use. *Annals of Internal Medicine*, 154(10), 666-671.

Adler-Milstein et al. (2010, Jan). Characteristics associated with Regional Health Information Organization viability. *JAMIA*, 17(1), 61-65.

Senge, P.M. 1990. *The fifth discipline: The art & practice of the learning organization*. New York: Doubleday/Currency.

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