

# Performance Strategies



Get Ready for the Future of Healthcare

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## Leveraging Grants and Stimulus Funds to Connect Care



### Challenge

Patient care in the U.S. is fragmented, with patient data sitting on virtual islands — often only sitting where care is delivered and seldom shared across organizational boundaries. Yet, understanding a patient's complete health record and coordinating care is critical to care quality, patient safety and managing costs. Electronic health records (EHRs), interoperability and connectivity solutions are essential to tackling today's challenges of making healthcare more affordable and accessible. Fortunately, federal and state officials are pushing for EHRs and connectivity strategies to improve care coordination. Even more importantly, these efforts are being backed with ARRA grants and funding.

What can leadership teams do to leverage available funding while setting their organizations up for long-term success? Read the responses of leaders attending the McKesson Executive Leadership Summit for CEOs.

### CEO Summit Discussion

#### Providers Vary in Levels of IT Implementations and EHRs

Most CEOs built their organizations' IT strategy three to five years ago because it was "the right thing to do" in order to improve quality and patient safety. However, all are at different levels of implementation: EHRs, computerized provider order entry (CPOE), bar-code medication administration, etc. While most said they felt they were already headed in the right direction, some said they might tweak their IT strategies to qualify for ARRA funds.

#### Approaches to Funding Differ by Organization

CEOs want to learn about grant opportunities and how to qualify for economic stimulus funds. The majority are looking to ARRA grants and HITECH incentives to fill in the blanks for technologies they cannot afford to fund, and even to help create health information exchanges (HIEs). Some CEOs have taken an aggressive approach with lobbyists and grant managers/writers on staff, while others without such resources are unsure where to go for help. Many providers expect their health IT vendor to "sort through the noise" on funding options.

#### Coordinating Care Across the Continuum Is No Easy Task

While models for managing care outside the hospital vary by health system and geography, most CEOs agreed that this is the time to either lead or be forced to follow.

Coordinated care involves many stakeholders. Often, one or more acute-care facilities anchor health systems, while affiliated service lines — such as physician practices, homecare, long-term care, skilled nursing facilities, surgical centers and health/wellness clinics — address a wide range of care settings. Patient connectivity is another key strategy for reaching into the community and establishing complete continuity of care.

CEOs at the roundtable agreed that connecting physicians to patient data across the continuum will support the transformation of healthcare. Participants discussed how to connect practices with their healthcare organizations. Some participants were emphatic about pursuing a single-vendor solution in ambulatory environments. As one CEO said, "We've got to drive to integration — we can't afford multiple EHRs."

CONTINUED ON PAGE 2

## Leveraging Grants and Stimulus Funds to Connect Care (Cont.)

Others are taking a much more flexible approach depending on the practices involved and what systems are already in use. Many participants agreed that the future is murky, and most are waiting on the exact “rules of engagement” regarding meaningful use. They asked: Is it an EHR implementation or a connectivity issue? One CEO summarized, “Buying an EHR is not the end game — it’s the exchange of information we need to achieve.”

Roundtable participants also reported that care coordination across settings and physicians is challenging, with patients often forced to coordinate and manage their own care. This situation is especially problematic among the uninsured or the under-insured, who either “consume the urgent care center or consume the emergency room.” This is due in large part to their lack of health insurance, and thus a lack of regular care through primary care physicians.

### ***The Role of Government in Promoting and Enabling Connectivity***

Surprisingly, many hospital executives advocated a stronger role for government in defining interoperability standards, noting the need for federal bodies to regulate technologies so they know which system to use — or choose. One CEO cited the state of Michigan’s move several years ago to require infection-control reporting on a single system. “It was difficult at the time, but it worked,” he said. “Government can be a positive influence on establishing standardization.”

States and extension centers also have a role to play in information exchange by connecting centers of care. While hospital leaders see HIEs as a potential way to reduce costs, they also predict healthcare reform will lead to bundled payments and make HIEs a requirement. Some suggested creating a national registry so patient data lives at the federal level to ensure the same data is available to everyone. And some CEOs who focused primarily on EHR strategies to automate affiliated and independent physician practices now realize they need to move quickly on connectivity strategies for all affiliated physicians.

### ***Transforming Quality and Cost of Care via Connectivity***

Regardless of the organizational structure, most participants believe the right technology strategy is fundamental. Summit participants agreed on the importance of interoperability, even though they differed on the level of information integration to emphasize or pursue.

### **SUMMARY: Leveraging Grants to Connect Care**

- Hospital CEOs are keenly interested in obtaining ARRA grants and funding to support existing IT strategies, but they need help
- Despite the challenges, this is the time to decide whether to follow or lead
- The patient must come first in any IT strategy
- Most are counting on their health IT vendors to understand HITECH legislation and sort through the noise
- They want to understand what “strings are attached” and what will be required to demonstrate meaningful use
- Connecting care settings is critical to transforming care delivery and may be required to effectively address future reimbursement models

## Leveraging Grants and Stimulus Funds to Connect Care (Cont.)

### How IT Can Help

#### Demonstrate Meaningful Use with Connected Clinical Solutions

To take advantage of HITECH funding, healthcare providers – inpatient and ambulatory – must achieve and demonstrate meaningful use of certified EHRs. Demonstrating meaningful use will require: capturing and sharing data; advancing care processes with decision support; and measuring and reporting key clinical indicators. Adoption of EHRs, computerized provider order entry (CPOE), performance analytics and other health IT will be key.

Equally important will be timely, secure information exchange to ensure continuity of care between inpatient and ambulatory care settings. Connectivity solutions enable provider-to-patient reimbursable online visits, online provider collaboration, as well as the ability to share results with other providers or with the patient via a Personal Health Record. HIEs are emerging as a cost-effective, workable approach for healthcare organizations to reap benefits today while positioning themselves for community, regional and national connectivity in the future.

To position your organization, you should:

- Ensure seamless flow of information between the [inpatient EHR](#) and [ambulatory EHR for employed and affiliated physicians](#)
- Provide an [ambulatory EHR and practice management software designed for independent physician practices](#)
- Make comprehensive and timely patient condition information available to all caregivers with a [computerized provider order entry \(CPOE\)](#) solution
- Connect providers, practices, payors and patients via [connectivity solutions](#)
- A [health information exchange](#) can satisfy data exchange requirements, enabling connectivity between different participants in healthcare, including physicians, hospitals and patients, and may also enable exchange-to-exchange connectivity
- Take advantage of ARRA grant funding opportunities from the federal and local governments and institutions with McKesson's complimentary grant identification service ([GIFToffice@mckesson.com](mailto:GIFToffice@mckesson.com))

#### Connectivity Success Stories

[Centra: Leveraging Connectivity to Improve Overall Population Health](#): Centra implemented 24 new applications to integrate financial and clinical processes. It leveraged high bandwidth connectivity across facilities and physician practices to improve the health of the community.

[Methodist Medical Center Says Meaningful Use is the Quality Imperative](#): Methodist launched a multi-year plan to overhaul its IT infrastructure to help improve patient safety, documentation, communication and financial stability. Its Board approved 75 licenses for ambulatory EHRs under the Stark law.

## Learn More

[Virtual Information Exchange: Healthcare's Present and Future HIE Solution](#)

[iHealthbeat: ONC Awards 1.2 million for AHIMA State-Level Health Data Exchange Project](#)

[ADVANCE: Connecting Stakeholders to Improve Care](#)

[Medicare to Join State-Based Care Delivery System Reform](#)