

Customer Spotlight

MEDITECH

Inland Northwest Leads the Way Toward Improving Treatment Through I.T. Automation

Encouraging physicians to follow best practices can be a challenging endeavor, but Inland Northwest Health Services (INHS) is finding that I.T. automation is the key to achieving the highest levels of compliance.

Case in point: Teaming up with the Washington State Department of Labor & Industries and the University of Washington, INHS is participating in a pilot project to develop, implement and track best practices when caring for injured workers receiving workers' compensation. With the help of electronic case management and integrated information exchange, clinicians are assisted in addressing critical areas of the emergency department to track activity, better manage injured workers' care, and assure appropriate continuity of care with community providers.

"During this project, INHS has been able to provide care coordination to more than 30,000 workers using only two and a half full-time employees," says INHS' CEO Tom Fritz. "We experienced substantial savings all around, as well as a significant reduction in chronic disability claims. In addition, patients of physicians enrolled in the program demonstrated a 33% decrease in compensable time loss claims—and an average of \$495 savings per case for all claims."

The encouraging results from this project serve as just one example of how high-achieving hospitals are becoming increasingly dependent on health care information systems for measuring quality care. In INHS' case, leaders recognized early on the importance of utilizing information for improved outcomes, and established a regional health information organization (RHIO) which has attracted national attention. Fritz is actively involved in public policy and how it shapes the future of health care technology.



"This is a very exciting time for health care I.T.," he says. "Legislative and public attention is increasingly focused on technology's role in improving the health care system in the United States. Health Information Exchanges (HIE) on both the regional and state scales, as well as electronic and

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— Tom Fritz, CEO at Inland Northwest Health Services

personal health records, are all part of the national vision for health care. In addition to securely sharing patient information, the national vision focuses on improving outcomes by reducing medical errors and delivering consistent high-quality care."

Reality Bytes in Establishing Consumer-Centric Care

Although privacy is a huge part of the debate—as well as an obstacle health care I.T. is working to overcome—consumers continue to have a high level of trust in doctors and hospitals managing their data. The potential benefits to patient safety outweigh privacy concerns among most legislators and consumers alike, and the public is invested in the idea of consumer-centric care, in which medical information moves with consumers. Thus, it is in providers' interests to want to deliver care electronically as well as in person, and have more time to spend on direct patient care. In fact, consumers believe that practitioners already keep clinical records in a computer-based system and share clinically-appropriate information with hospitals when providing care, even in instances where this is not the case.

The reality of the health care delivery system is far differ-

ent from what consumers expect. Massive variations in standard practices and high rates of inadequate care are well documented, as are unacceptable rates of preventable errors associated with patient injury or death. There is a significant gap between what we know and what we do, says Fritz, who also refers to recent study in the *New England Journal of Medicine* which concludes the health care system only 'gets it right' about 54.9% of the time.

"Over 50% of all resource expenditures in hospitals is comprised of quality-associated waste from preventable mistakes such as unnecessary treatments and inefficient care delivery," Fritz says. "The Office of the National Coordinator designed a strategic framework to address these problems. This strategy involves four goals: inform clinical practice, interconnect clinicians, personalize care and improve population health. Because most communities are only at a 15- 30% EMR adoption rate, advancing to the second goal, interconnecting clinicians, becomes difficult."

Adopting a Hospital-Based Care Model

The organization's acute care facilities, which utilize INHS' integrated I.T. network services, are now using the MEDITECH system to move closer to these national strategic goals. For example, by measuring data collected in the system, the hospitals are improving treatment outcomes through clinical performance. Although health I.T. enables clinical performance measurement, Fritz says gauging performance data is still a significant undertaking. Developing HIEs such as the INHS network helps create the foundation and building blocks for clinical performance measures and minimizes medical errors.

On the outpatient side, it's a different story. When it comes to collecting accurate, comparable and comprehensive data, Fritz cites physician adoption as being a key component to the success of implementation and access to information. "When the INHS network was formed in 1996, physician buy-in was dependent on the real-time availability of complete clinical results," says Fritz. "Due to our collaborative, community-wide efforts to provide access to data in real time, we have been able to achieve physician office EMR adoption of 40%."

Keeping the practices connected to hospitals in the HIE is the INHS network, which acts as "anchor tenants" of the exchange by being the application service provider, or ASP, of the physician offices' electronic medical record along with hospital data. Thus, INHS has become the trusted "third party:" for securely managing shared assets and data. "Hospitals are naturally in a position to provide leadership, vision, and momentum to such mammoth technology projects, and their pivotal role is aiding in the evolution of any HIE to include community protection," says Fritz.

With the information network as anchor, ambulatory care, local emergency services and public health services such as the Centers for Disease Control can communicate more readily and perform more efficiently in the event of a major disaster. INHS has already demonstrated this ability on a smaller scale. "By utilizing information in the MEDITECH HCIS, one of the INHS-networked hospitals was better able to manage patient care in their emergency department," Fritz says. "Divisions went from 31 days in 2003 down to 14 hours in 2004. They were able to admit an additional 1,000 patients over previous patient volumes."

Consumers Are Key to Achieving A National Vision

With progressive health care organizations like INHS leading the way, the national vision of an electronic health record for every patient—once far-fetched—is quickly becoming a reality. Fritz also observes a shift in attitudes toward health information. "Patient information records, once thought of as an institutional asset, are now being seen as a personal commodity, with hospitals and the government encouraging this transformation," he says. "Consumer empowerment, through education and access to information, is forcing health care to be organized around the needs of the patient rather than the health care delivery system functions."

Consumer demands regarding health care I.T. are beginning to affect outpatient providers as well. Physicians' practices will soon need to address process redesign, just as hospitals have been working to adapt their workflows to a technologically-based environment. Hospitals have already started working with federal agencies such as the AHRQ and CMS to track utilization, procedures, complications, and death rates based on appropriate outpatient care and management using health care I.T. applications.

"By working with federal agencies to utilize performance measures, and not just collecting but also analyzing the data in clinical systems, hospitals will be able to share information and improve communication with ambulatory care facilities to provide a true quality continuum of care," says Fritz.

About Inland Northwest Health Services

Inland Northwest Health Services, a non-profit corporation based in Spokane, Washington, provides the backbone for current and future innovative technologies in health information exchange. INHS connects 38 hospitals in three states and includes more than 4,000 physicians, 450 clinics and physician offices, and 2.8 million electronic medical records.

About MEDITECH

MEDITECH has been the leader in the Health Care Information Systems (HCIS) industry since 1969. MEDITECH's applications unify clinical, administrative, and financial information across a health care organization, including acute care, long-term care, home health care, and physician practices. Today, more than 2,000 institutions worldwide use MEDITECH's information systems. For additional information on MEDITECH products and services, visit www.meditech.com.