

Symposium Report

Accelerating e-Health Collaboration in North Carolina

November 7, 2005

On November 7, 2005, the North Carolina Healthcare Information and Communications Alliance, Inc. (NCHICA), Dell and the Technology CEO Council welcomed approximately 100 North Carolina healthcare stakeholders to Greensboro, North Carolina for a symposium on e-Health Collaboration in the state. The purpose of the symposium was to facilitate discussion among North Carolina policymakers (state, federal and local), healthcare thought-leaders and representatives from the various healthcare sectors, with the goal of developing strategies to accelerate the adoption of information technology into the North Carolina healthcare delivery system.

Throughout the morning, symposium attendees participated in two plenary sessions and one breakout session. These sessions included:

Opening Plenary Session

Keynote: The Honorable Richard Burr U.S. Senator (R, N.C.)

Senator Burr's keynote addressed the need for transforming the U.S. healthcare system to realize the benefits of information technology. He said that the dramatic changes needed from Congress can only happen if the American people show broad support for this goal, which highlighted the importance of events like this. Although Congress has been reluctant to change, there is a recognition that healthcare is the number one issue in the country. People must have access to care in urban and rural settings, and the system must be prepared to respond to bioterrorism and pandemics.

*Keynote: Bruce Mehlman
Executive Director of the Technology CEO Council*

Mr. Mehlman introduced the "A Healthy System" report and "e-Health Readiness Guide" both recently released by the Technology CEO Council, a coalition of IT companies. He discussed the importance of public policy and its impact on health IT. The member companies of the Technology CEO Council are: Applied Materials, Dell, EMC, HP, IBM, Intel, Motorola, NCR and Unisys. [Additional copies of "A Health System" may be obtained at www.techceocouncil.org]

Breakout Sessions

The three breakout sessions were moderated roundtable discussions by the symposium participants that focused on recommendations for improving and/or accelerating progress in the respective topic areas. The following pages contain summaries of the discussions and recommendations from each session.

- Connecting Communities
Accelerating the RHIO Process
- Gaining Clinical Benefits Now
Accelerating Viable Financing & Sustainability Models
- Technology Lessons
Applying Best Practices from Technology Companies for HIT Implementations

Closing Plenary Session

Breakout Session Reports: Linda Rebrovick, Dean Rosen and Holt Anderson

The session leaders presented a summary of the key findings and recommendations of each breakout session. These recommendations can be found in subsequent pages of this report.

Keynote: The Honorable Kay Hagan, N.C. Senator and Co-Chair of the NC Senate Appropriations Committee

Senator Hagan's keynote articulated the growing need for the state of North Carolina, as a large provider and payor of healthcare services, to improve the efficiency of the state healthcare system. She focused on the significant administrative cost of North Carolina's healthcare system – almost 33% of the healthcare dollars – and the need to reduce those costs while bringing healthcare up to the information technology standards found in banking and business.



BREAKOUT SESSION

Connecting Communities: Accelerating the RHIO Process

Moderated by Holt Anderson, NCHICA

Session Synopsis

The goal of a regional health information organization (RHIO) or multiple organizations in a state as large as North Carolina is to encourage, facilitate, develop and maintain the quality, security, storage and sharing of medical data over a region as part of a standards-based national network. Meeting these goals relies on the ability to exchange health information among all parties involved in the process of providing care. This breakout session focused on why communication is vital to achieve the goals of the RHIO.

The group broke down the process of creating a platform for exchange of health information. Starting with standards, the group identified that privacy, data ownership/control, and trust could never be achieved without a standardization of policies and processes. This standardization must come from a coordinated effort between local and state entities and the National Health Information Network (NHIN). Through standardization, we can achieve the critical level of security and privacy central to building the confidence of consumers, so they will join and be supportive of the process of accelerating the adoption of RHIOs.

Once the policies and secure methods of exchanging healthcare data are in place, we can begin to build the network to utilize the transportation of data to and from multiple care providers. Patient consent and information control are paramount to the ability to transfer electronic medical records to the right people, at the right place, at the right time. Another significant challenge is that of positively identifying patients. Following other industry models, a unique patient identifier or a form of probabilistic matching should be put in place in order to link records for the same patient from difference sources with a very high degree of accuracy. The conclusion of the session is that RHIOs are built via process of cooperation, standardization, and the need to maintain the security of information. These are central concepts to the success of the RHIO as a unit and a network.

Session Recommendations

- Clarification of privacy laws and regulations to minimize any misinterpretations that might lead to impediments in the exchange of health information among enterprises, within a state, and among states
- Continue to build toward a uniformity of:
 - Data standards
 - Access policies, procedures and methods
 - Network architecture
- Recognize the value of consumer control via personal health records:
 - Certification of security of applications, systems and networks
 - Quality of data
 - Certification of data accuracy
 - Accountability
- Focus on educating consumers about the value of information technology and electronic exchange of health information to improve quality, safety, effectiveness and efficiency of the healthcare system
- Clarify ownership and right to data
- Refine methods of utilizing identifiers to ensure matching when linking health and medical records
- National Health Information Network (NHIN)
 - Foster a national and statewide effort in support of a uniform infrastructure that will facilitate the exchange of health information among healthcare providers
 - Encourage capabilities that will allow patient responsibility for management of their own health information and that of close family members
 - Identify key stakeholders and find ways to engage them in the development of North Carolina's connected communities
 - Determine the needs of the market and offer incentives to accelerate the adoption of information technology across all regions, markets and sectors in North Carolina



BREAKOUT SESSION

Gaining Clinical Benefits Now: Accelerating Viable Financing and Sustainability Models

Moderated by Dean Rosen, Mehlman Vogel Castagnetti, Inc.

Session Synopsis

This session featured a discussion that centered on creating a working financial model for Health Information Technology adoption and sustainability in North Carolina. The discussion centered on two topics: 1) the financial barriers to e-health adoption; and 2) the solutions and responses to foster a sustainable model of health IT adoption in North Carolina.

In order to focus on financial viability from a macro level, the group focused on tangible expectations. Do consumers have an understanding of HIT and its potential? Do we have standards in place in order to apply health IT? What are we, as a community, expecting out of our investment? Will doctors, hospitals, payors and patients be better off afterwards?

The discussion then shifted from questions to solutions. It was clear that the financial viability of an electronic medical record (EMR), the benefits of the system, and a clear return on investment need to be at the forefront of any discussion. Purchasers are looking for systems with the ability to put high quality records in front of them, on demand. This ability requires a completely integrated system between payor, provider and patient. Some were skeptical that it would be difficult to prove that clinical improvements directly resulted from new electronic records management systems. On a related note, participants indicated that physicians will invest in EMR systems only if they are fairly certain that the system is appropriate and compatible in the long-term and will prove worth the investment. Getting consumer buy-in would also be difficult unless a more concrete case could be made that the investment in health IT will show marked improvements in clinical outcomes and ease of access to the healthcare system. At the conclusion of the breakout, the group started to circulate the solutions to a financially viable system. A partnership between public and private entities must be forged in order to ensure a successful adoption. No one entity can afford the risk without the other stakeholders. Training and standards for data must be put into place before investments can be made. The assumption of the group is that before an investment, the stakeholders require steps to ensure a quality system can be adopted.

Session Recommendations

- **Government Funding:** Federal, state and local government should increase funding and support for IT adoption
- **Training:** Recognize that some of the financing needs to be applied to training and technical assistance
- **Realignment of Incentives:** Public and private payors should realign incentives to reward value and efficiency through greater use of IT
- **Standards and Certification:** Federal government should encourage the development of interoperability standards and a certification process
- **Long-Term Commitment:** Ensuring sustainability through a long-term financing commitment and enabling consumers to drive change



BREAKOUT SESSION

Technology Lessons:

Applying Best Practices from Technology Companies for HIT Implementation

Moderated by Linda Rebrovick, Dell Healthcare

Session Synopsis

The most persistent and influencing factor in Health IT is the culture of resistance to change. Resistance to change exists in all four P's: physicians, patients, payors, and politicians. Although patients seem to be the most eager for change, there is still some speculation and unfamiliarity with what technologies exist to help them. Industry leadership with government support is essential to help defeat this resistance to change.

A chronic problem is that state-level solutions are often adopted by the federal government in some variation and then, if the federal government likes them, are forced back down to the state level. This cycle creates inefficiencies because the federal government adopts many varieties, without being about to streamline integration.

It is up to the leaders in the healthcare and technology sector to generate demand at the patient, provider and payor levels to force universal adoption and penetration. Cost savings for patients, payors and providers are not enough. Improving reimbursement rates and securing mobile health records can help add incentive to technology adoption. Leaders need to get the public to believe in the usability and security of electronic health and medical records.

Session Recommendations

- Create Incentives
 - **Physicians** – Pay for performance, quicker and improved reimbursement
 - **Payors** – Improved earnings as a result of more healthy patients
 - **Patients** – Save time, money and improved care
- Implement Patient-Managed Privacy
 - Patients own their health records and information
- Look to other industries to define best practices and standards
 - Must have champions and sponsors at the highest level
 - Need to set the vision and define the benefits
 - Develop multiple prototypes at the local level
 - Federal government adopts best solution and uses their power to make it happen
- Use adaptive technology that supports interoperability, networking and Internet use
 - Deployment of technology
 - Software vendors must use those standard

