

Health Information Technology in Maryland

Building upon National, State and
Local Initiatives

Presentation to Maryland State Task Force on Electronic
Health Record
January 18, 2006

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Maryland State Task Force to Study EHR

Information Technology can
help solve the challenges
of quality, safety and cost

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We need to answer tough
policy questions and
evaluate barriers to HIT
implementation

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**Diversity and complexity
surrounding a fractionated
system will challenge
consensus**

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Answers to the problems of
healthcare data sharing are
possible without delay

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Jumpstart learning from
federal, state and local
initiatives

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The federal government chose 4
vendors to lead the NHIN
development.

- Accenture
- IBM
- Computer Science Corporation
- Northrop Grumman

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Prototype winners include Vendors, Providers, and Communities

- Computer Science Corporation – lead vendor
- Communities – Indiana HIE, Massachusetts' MA SHARE, Mendocino HRE in California
- Vendors- Browsersoft, Business Networks International, CITL, CCBH, DB Consulting Group, eHealth Initiative, Electronic Health Record Vendors Association, Microsoft, Regenstreif Institute, SiloSmashers and Sun

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Fed Gov has contracted \$17.5 M to study
problems and issues common to all.

- Standards
- Privacy and Security
- EHR Certification
- EHR Adoption

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**\$3.3 M American National
Standards Institute (ANSI)
to create a HIT Standards
Panel**

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\$11.5 M to Health Info
Security and Privacy
Collaboration to evaluate
state privacy & security
laws

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**\$2.7 M to Certification
Commission for
HIT(CCHIT) to develop a
process for certifying
Electronic Health Records**

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**GWU to measure E.H.R.
adoption among providers**

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Learn from other state initiatives that
are ahead in planning and
implementation

- Community Implementation projects
- State Planning projects
- Multiple initiatives within states

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Community implementation projects without state government involvement

- Massachusetts
- Indiana
- California
- New York
- Utah
- Ohio

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Planning projects completed with state government involvement

- Maine – feasibility study
- Minnesota – strategic action
recommendations
- Virginia- Governor's Task force on HIT
- Wyoming – E.H.R. study

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Multiple regional initiatives within states

- Florida
- California
- New York
- Indiana

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Expand upon local initiative experience
and knowledge

- Primary Care Coalition
- Community Hospital initiatives
- DelMarva Foundation
- MD/DC Collaborative for HIT

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Primary Care Coalition in
Montgomery County

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Community hospital initiatives

- Washington County
- Shore Health
- Others?

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**DeMarva Foundation's
Medicare DOQ-IT program**

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**MD/DC Collaborative for
Healthcare Information
Technology**



MARYLAND/D.C. COLLABORATIVE
FOR HEALTHCARE INFORMATION TECHNOLOGY

Bringing Together Healthcare Providers and Organizations

to

Improve Patient Safety, Quality of Care and Efficiency

through

Healthcare Information Technology

Task Force to Study Electronic Health

Records

State of Maryland

January 18, 2006

Vision

1. Build a Non-Profit “Patient-Centric” Utility

to facilitate exchange of healthcare information across the Maryland/D.C. region and eventually beyond through connectivity with the emerging National Healthcare Information Network (NHIN)

2. Implement a Pilot Project to Measure the Impact of Healthcare Information Exchange on Patient Safety, Quality of Care, and Efficiency

specifically, to determine the costs and benefits of healthcare information exchange, incentives for physician adoption of electronic health records, and an economically sustainable business model for stakeholders in our region

3. Oversee Governance and Operation of Self-Sustaining Maryland/D.C. Regional Healthcare Information Organization (RHIO)

4. Drive Adoption of Technical Standards

to facilitate data gathering, information sharing and decision-making in lock-step with federally approved standards via the Consolidated Health Informatics (CHI) initiative

5. Define and Oversee Patient Privacy and Security Practices

above and beyond those mandated by HIPAA. The Collaborative’s Patient/Consumer Work Group will help ensure patient information is managed securely and confidentially

Organizations

- *Advanced Radiology*
- *Aetna*
- *American Radiology Services*
- *Anne Arundel Medical Center**
- *ARINC*
- *Baltimore Medical System**
- *Calvert Memorial Hospital**
- *CareFirst Blue Cross Blue Shield of Maryland**
- *Centennial Medical Group**
- *Clinical Associates**
- *Digestive Disease Associates**
- *Frederick Memorial Hospital**
- *Helix Family Choice**
- *Holy Cross Hospital**
- *Horizon Foundation of Howard*
- *Howard County General Hospital**
- *HPV Cardiologists**
- *Johns Hopkins Bloomberg School of Public Health**
- *Johns Hopkins Community Physicians**
- *Johns Hopkins Employer Health Programs**
- *Johns Hopkins Medicine (JHM)**
- *Maryland Academy of Family Physicians (MAFP)*
- *Maryland Department of Health and Mental Hygiene (DHMH)*
- *Maryland Health Care Commission (MHCC)*
- *Maryland Hospital Association (MHA)*
- *Maryland Insurance Administration*
- *Maryland Primary Care Physicians**
- *Maryland State Medical Society (MedChi)*
- *Medical Society of the District of Columbia (MSDC)*
- *MedStar Health (MedStar)**
- *MedStar Health Research Institute**
- *Priority Partners**
- *Shore Health System**
- *The Leapfrog Group*
- *University of Maryland Medical System (UMMS)**
- *University of Maryland's Department of Epidemiology and Preventive Medicine**
- *Washington County Hospital**

(* Collaborative Member Organization)

Governance Structure Established

- *501(c)3 non-profit Maryland corporation, since May 2004*
- **Established Member Classes:**
 - *6 Physicians (primary care and specialist)*
 - *6 Academic Health Systems*
 - *6 Community Hospitals*
 - *6 Health Plan and Payer Organizations*
- **Proposed Member Classes:**
 - *3 Healthcare Professional Societies and Government Organizations*
 - *3 Consumers/Pubic Interest Organizations and Employers*

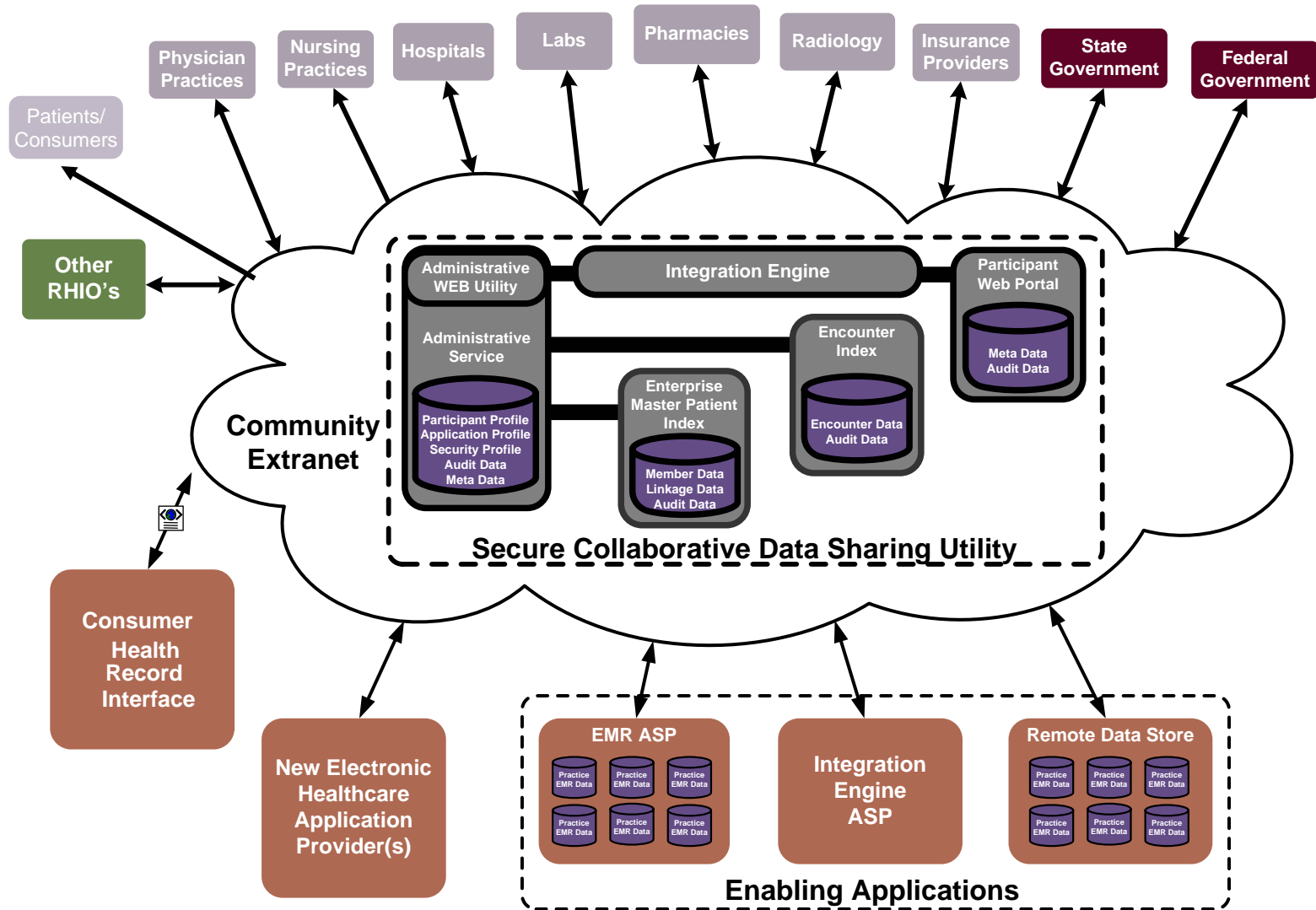
Working Groups Established

- *Steering Work Group*
- *Provider Work Group*
- *Technology Work Group*
- *Patient Privacy and Security Work Group*
- *Public Health and Outcomes Measurement Work Group*
- *Economic Outcomes Work Group*

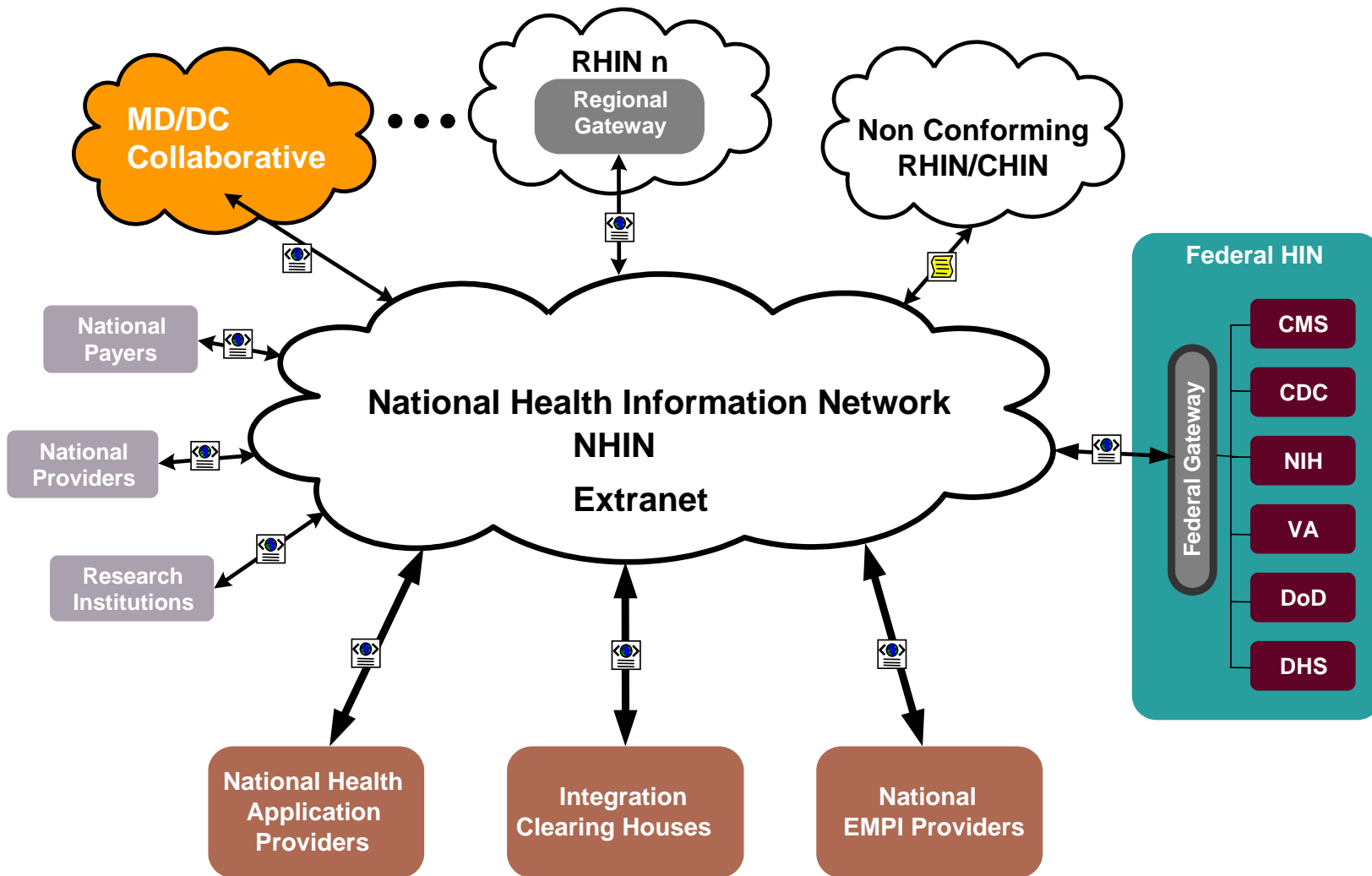
Formation of Technical Architecture

- *Beginning in July 2004, multiple meetings and scheduled “retreat” days including both **Provider and Technology Work Groups** and the MHCC*
- *Collaboration with **Annapolis-based ARINC** – experience providing similar capability to the aviation industry, one of the most highly integrated and connected industries in the world*
 - *Joint development of **Technical Specification Document/Vendor RFP***
 - *Hosted **vendor presentations** – CSC, IBM, J&J, PSI, MEDITECH, Initiate, RxHub, DbMotion, Oracle, etc.*
 - *Attendance and speaking engagements at **annual HIT conferences** – HIMSS, NHII, HIT Summit, CCBH, AHRQ, MPSC, Leapfrog, etc.*
 - *Meetings and monthly discussions with **other state initiatives** – MA, CA, TN, IN, UT, CO, RI, NC, FL, MI, etc.*

Technology Architecture



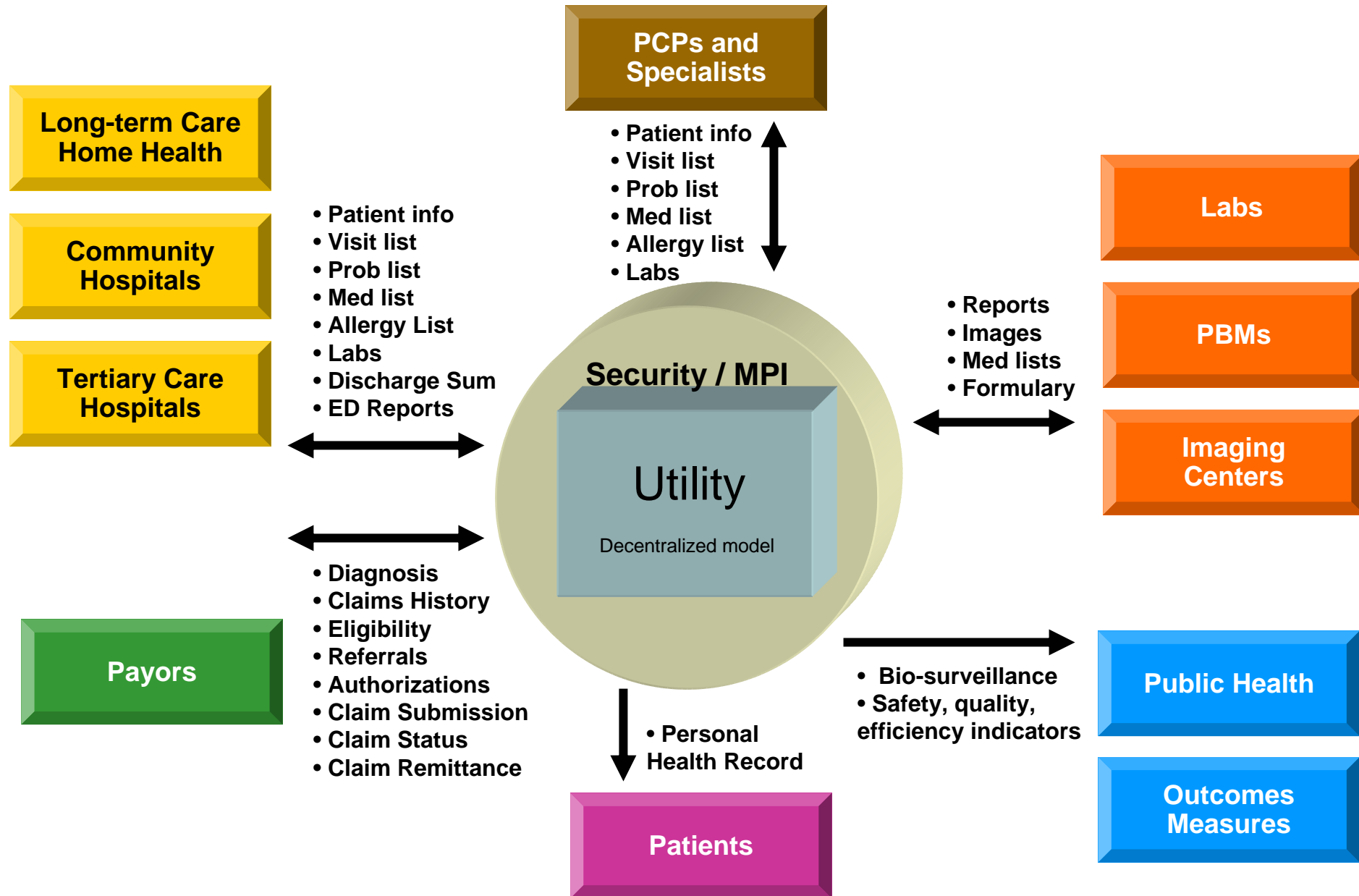
Linking to Emerging NHIN



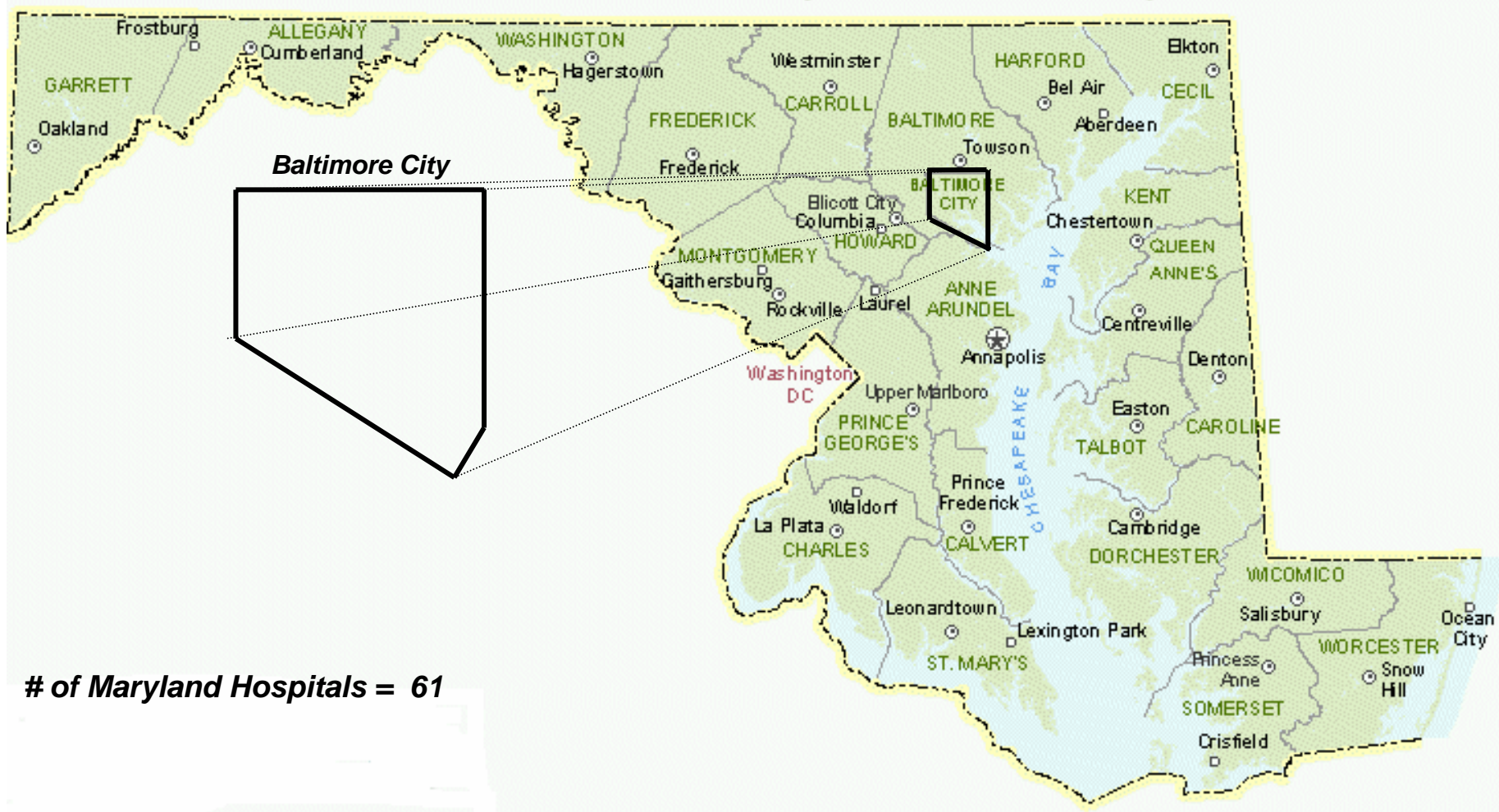
Patient Privacy and Security

- *Top priority and focus*
- *Will adhere to HIPAA regulation requirements*
- *Devoted Patient Privacy & Security Work Group*
- *Dedicated Privacy/Security Officer*
- *Integration with Technical Architecture*
 - *Business Associate agreements between participants, as called for by HIPAA*
 - *Modern security technology and practices*
 - *Strong authentication / authorization*
 - *Data encryption*
 - *Audit trails*
 - *Firewalls, intrusion detection, anti virus, and other tools*
 - *Oversight monitoring*
 - *Activation and deactivation policies*

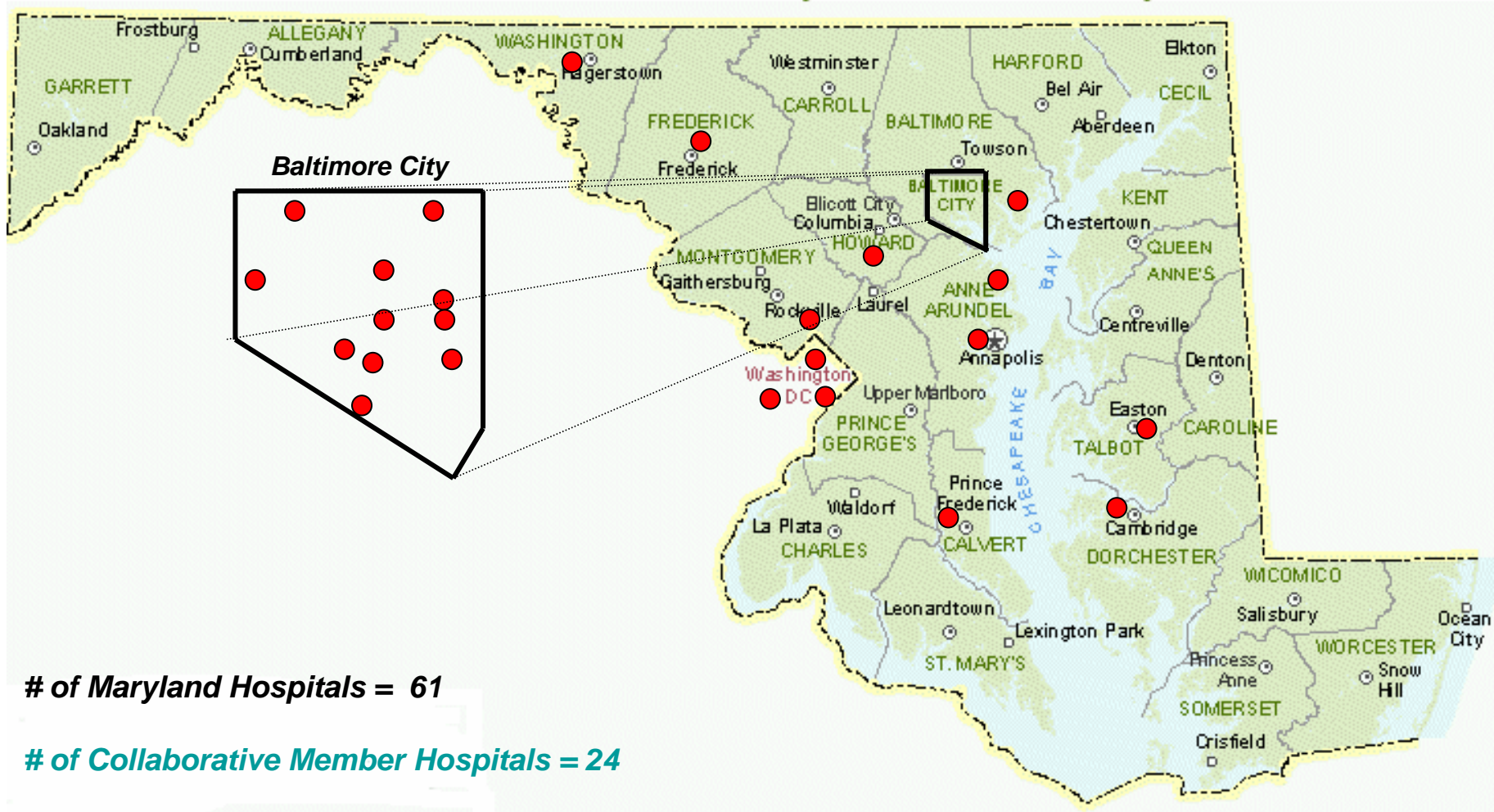
Broad Data Flow Schematic



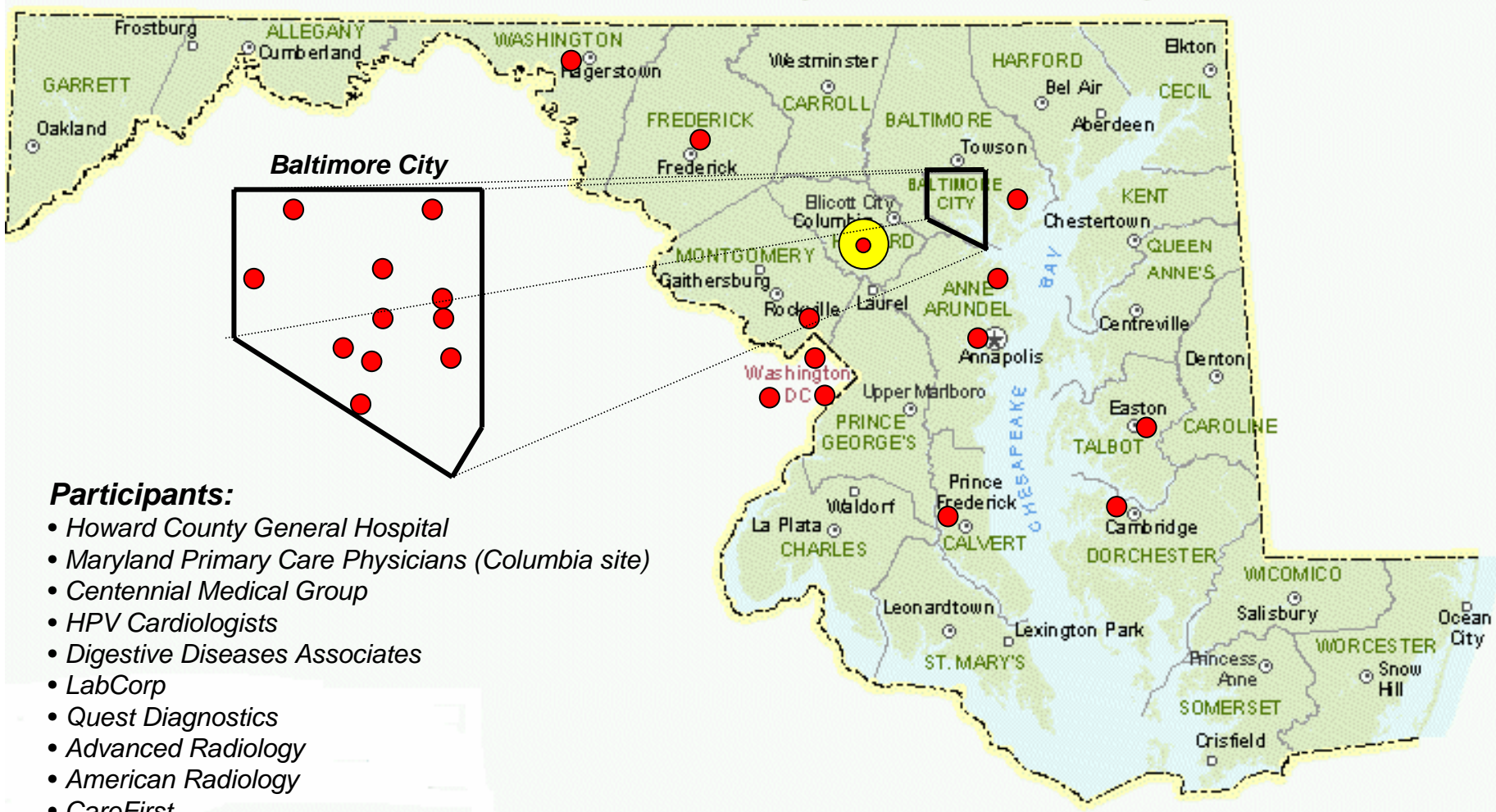
Collaborative Member Hospitals



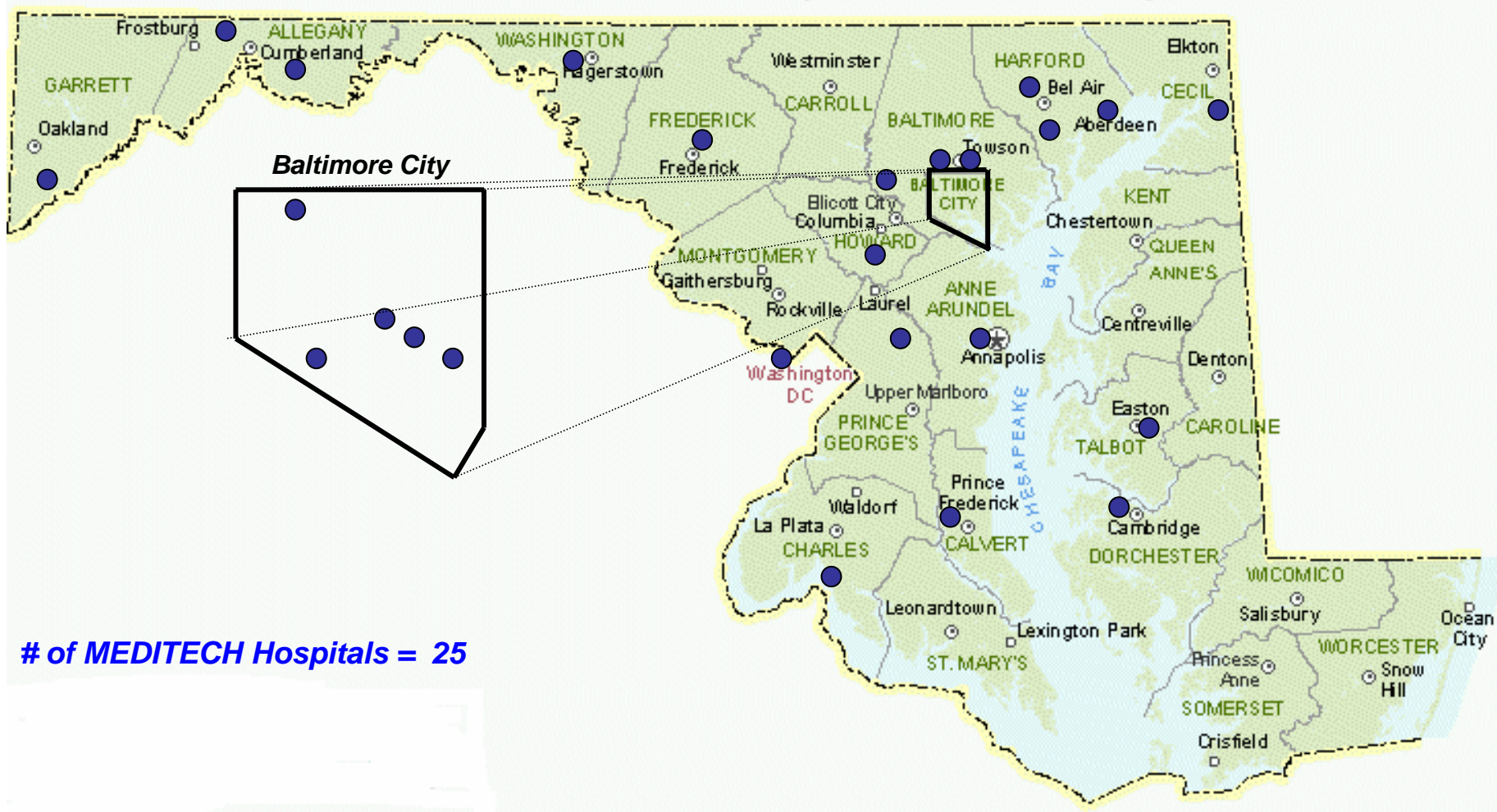
Collaborative Member Hospitals



Example of a Referral Network Area

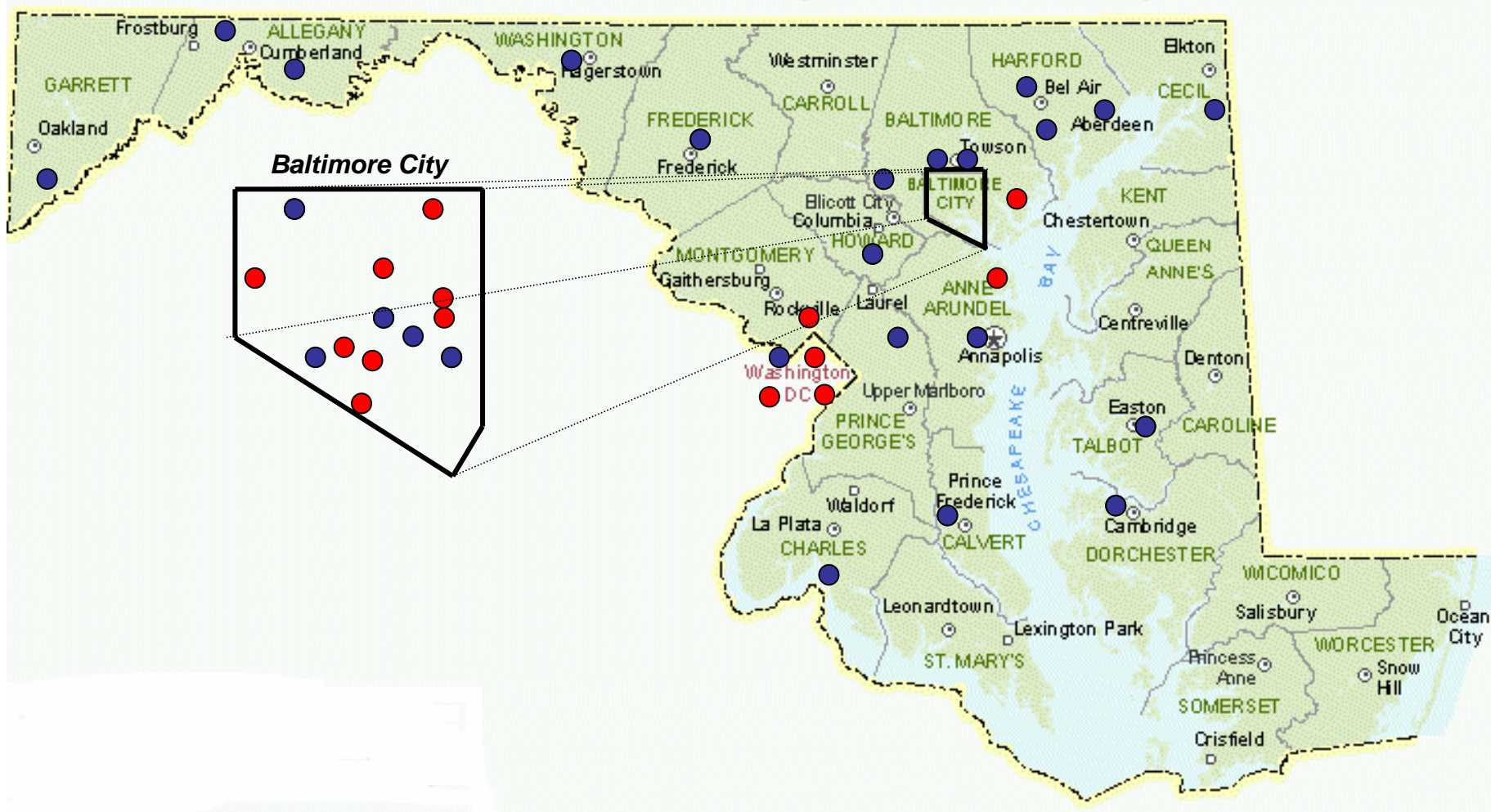


CONNECTION OF MEDITECH Hospitals



With one interface, the Collaborative's Clinical Data Sharing Utility will be prepared to connect to 25 Maryland hospitals that all use MEDITECH.

Regional Expansion



Combination of existing Collaborative member hospitals and MEDITECH hospitals will be the nucleus of the region-wide expansion.

Potential Business Models

- *The Collaborative's goal is to determine the benefits of data exchange to stakeholders. Stakeholders will then contribute based upon perceived safety, quality and efficiency value.*
- *Different business models may exist for different stakeholders.*
- *Possible business models may include:*
 - *Fixed % (subscription) based on pre-determined criteria such as*
 - *Facility size*
 - *Ability to pay*
 - *Transaction based on*
 - *Number of queries*
 - *Number of updates*
 - *Volume based*

In Summary

- *Over last 4 years, political “heavy-lifting” of collaboration was completed*
- *Broad provider, payer, and state-wide organizational support with agreed upon governance structure*
- *Willingness to move forward in unison*
- *Strong technological knowledge and leadership*
- *Designed demonstration project to determine incentives for adoption and a sustainable business model for electronic healthcare information sharing*

Maryland State Task Force to Study EHR

Can the state task force find the
answers to governing policies
and barriers to electronic
healthcare data sharing?

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Diversity and complexity of the
healthcare environment
challenge the answers to
policy and barrier questions

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**Jumpstart learning based
upon Federal, State and
Local initiatives**

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**HIT issues are very complex
and are constantly
changing**

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**MOVE FORWARD IN
LEARNING TOGETHER**

Maryland/DC Collaborative RHIO



MARYLAND/D.C. COLLABORATIVE
FOR HEALTHCARE INFORMATION TECHNOLOGY

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Chairman

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Healthcare Information Technology

www.collaborativeforhit.org