Indiana Health Information Exchange

Better Outcomes. Delivered.

Past, Present…Past?

Innovations to Support Population Health

March 2017

Agenda

- Overview of IHIE
- A brief look back
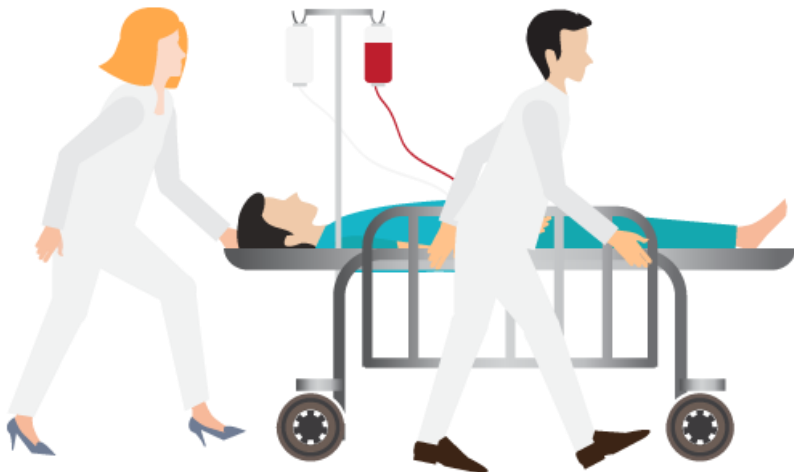- Where we are now
- Where we're headed
- Discussion and Q&A

Indiana Health Information Exchange

Overview

About the Indiana Health Information Exchange

Indiana Health Information Exchange

Vital Statistics

MISSION
Through information exchange,
we improve health and healthcare.

- Nation's largest HIE
  - 100+ hospitals, representing 38 health systems
  - 12,000+ practices with over 30,000 providers
  - 12 million+ patients
  - 9 billion clinical data elements

- Interoperable with 4 HIEs; will be exchanging among 7 HIEs in 2017

- Board Composition: Hospital System CEOs, Healthcare Associations, Academia, State, Community

- Regenstrief Institute partnership

- A 501(c)3 supporting organization

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Our "Footprint"

Hospitals

Physician Practices

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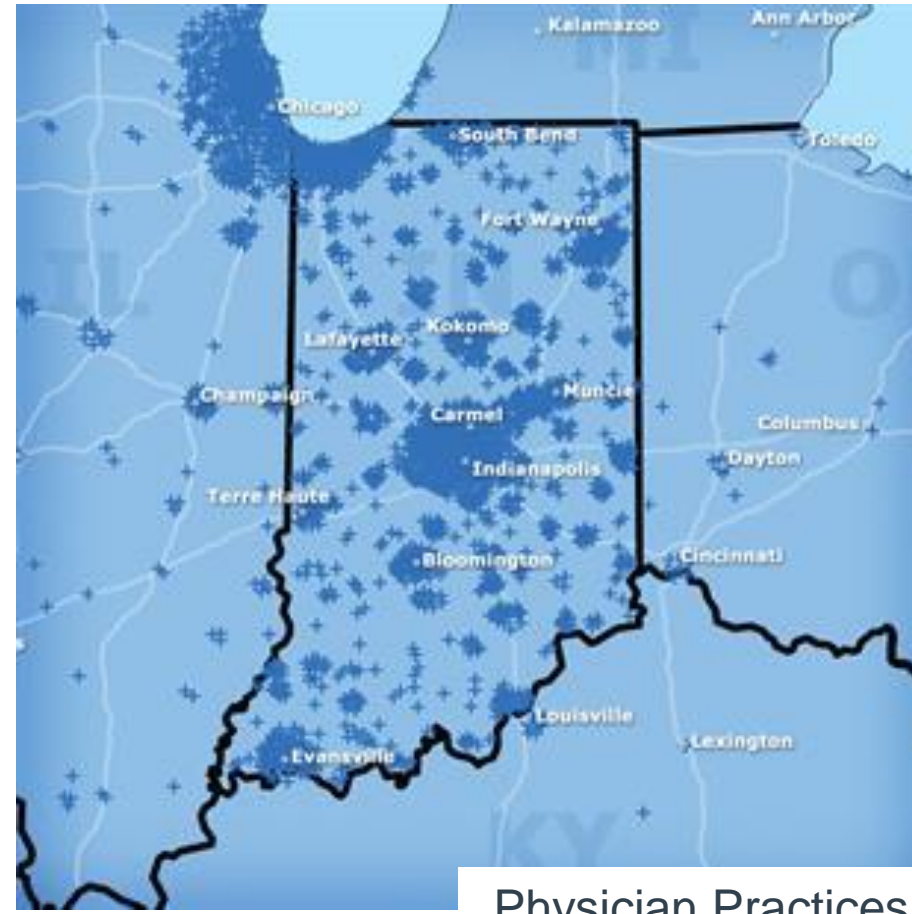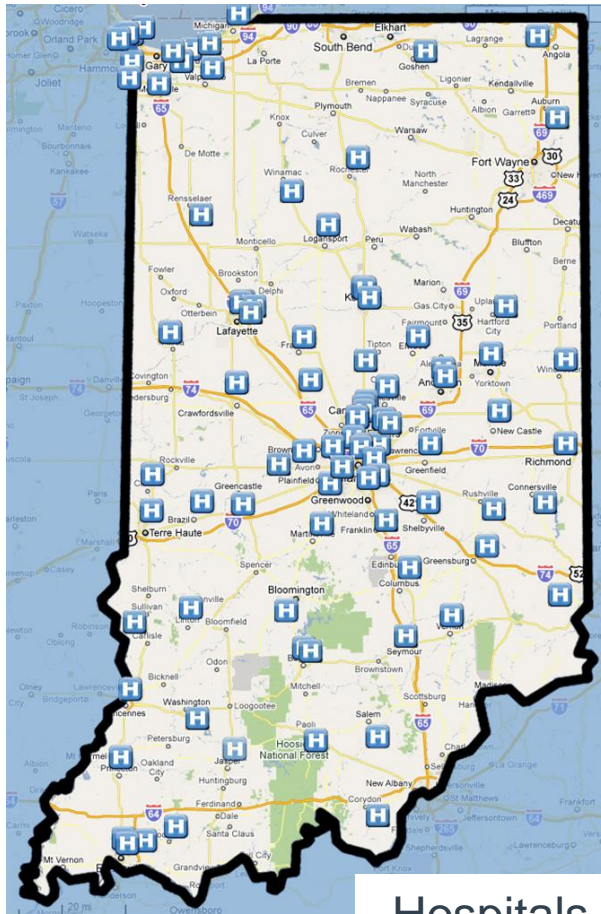
Our Customer Base

Hospitals

Long-term/Post-acute Care (LTPAC)

Payers

Physicians

Federal Government

Public Health

Labs and Imaging Centers
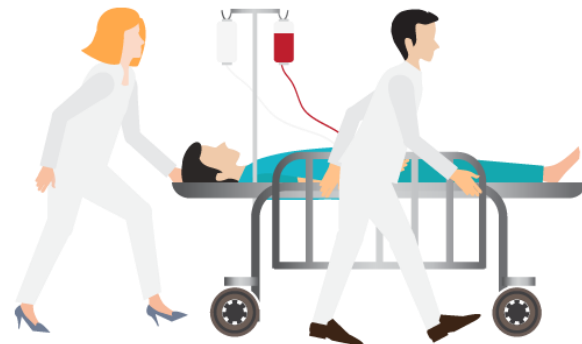
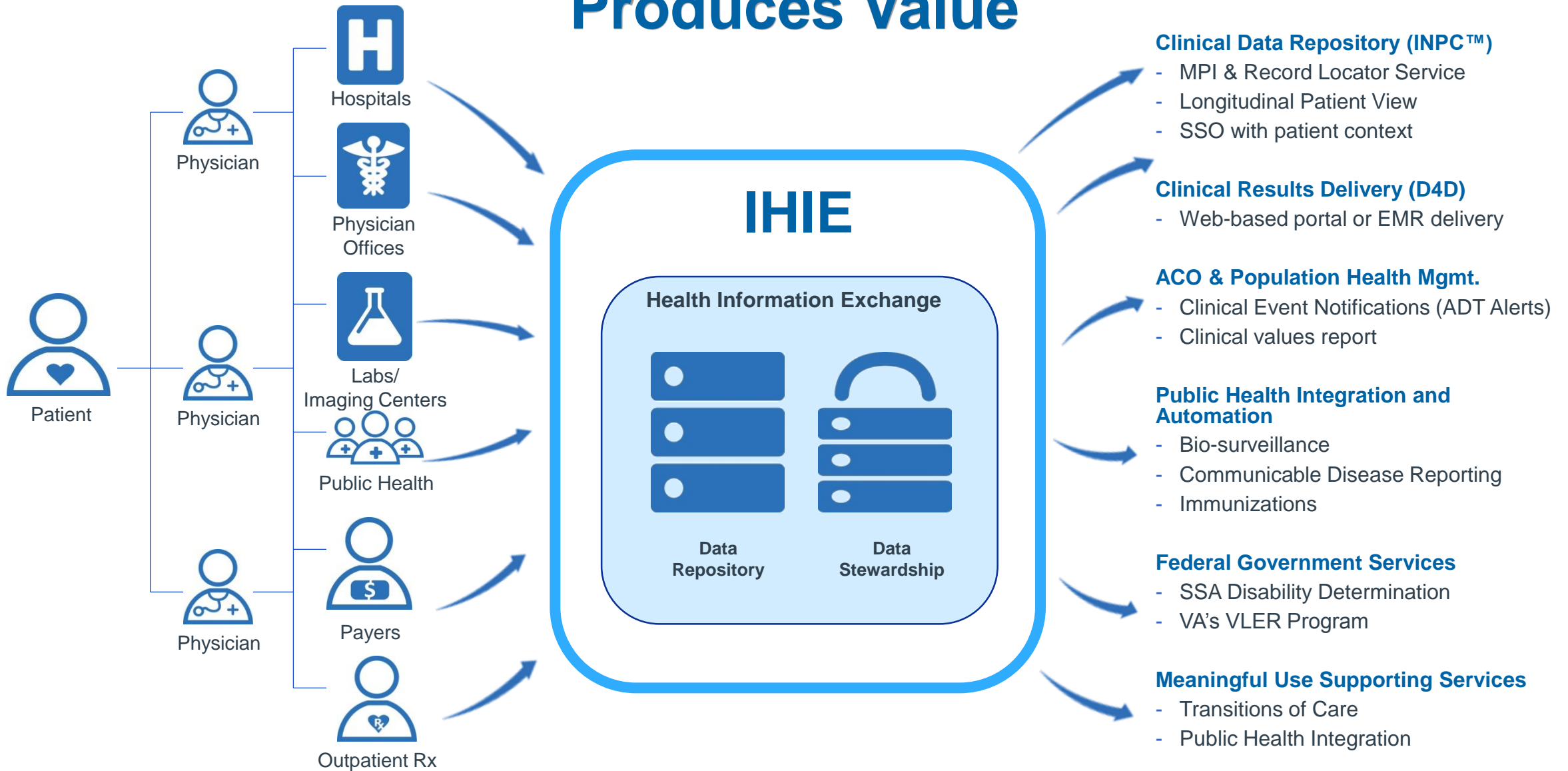Indiana Health Information Exchange

What is HIE?

Clinical Data

HIE

Hospital

Payer

Physician

Lab/Imaging Center

Long-term Care

FQHC/CHC

Other Healthcare Orgs

Data, Services, Value

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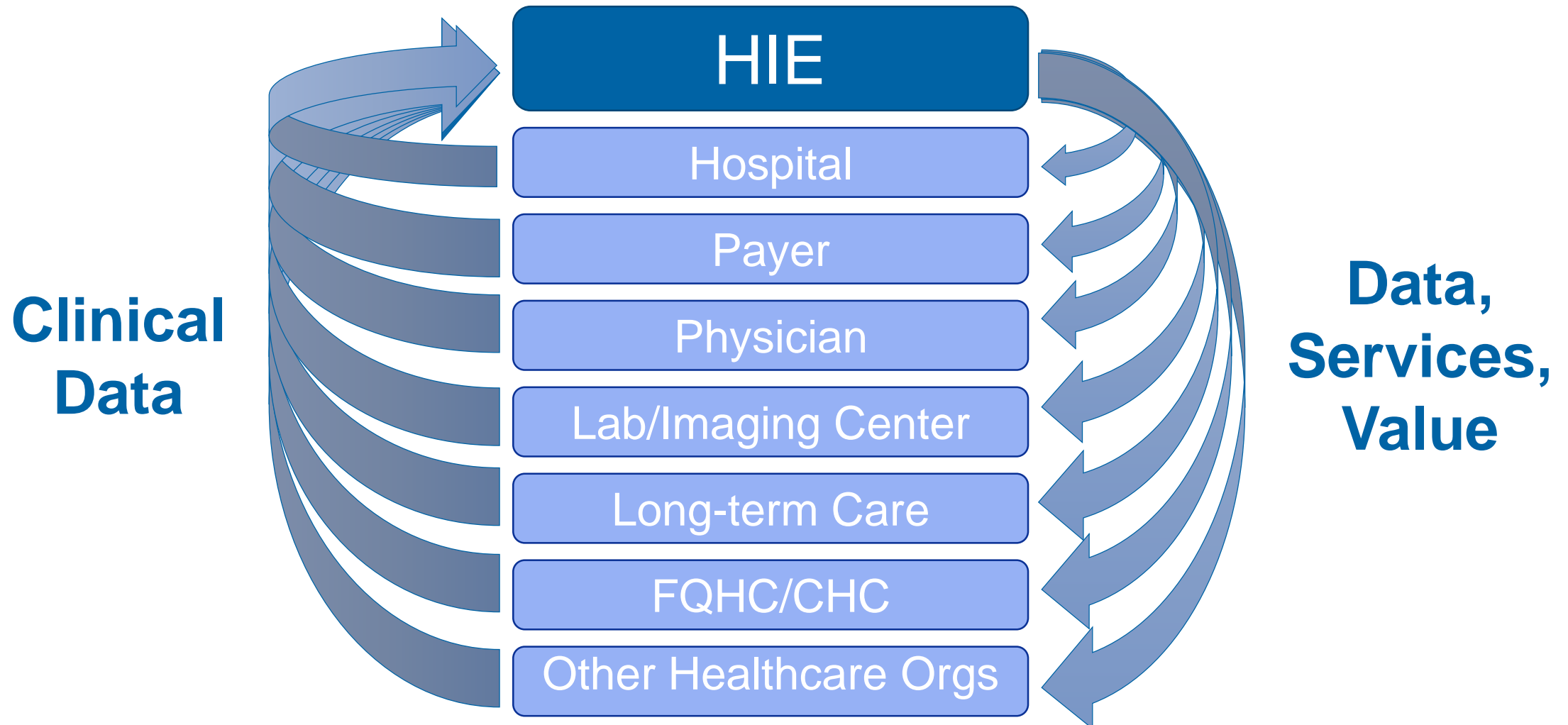
Indiana Network for Patient Care

The **INPC** is one of the nation's largest inter-organizational data repositories and contains nearly 9 billion clinical data elements over 30 years.

The INPC is:

- A robust clinical data repository, a governance structure, and an interoperable technology infrastructure
- A source of aggregated clinical data for a patient or a population
- Includes provider, payer, and public health data
- Real time interfaces from providers – lab, radiology, CCDs, transcription, cardiology, ADT
- Utilized heavily in hospital emergency depts, but also in a growing number of clinical and population health management settings
- Supports medical research

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Review of Services

One Care

This suite includes some of our most widely used products, such as DOCS4DOCS and CareWeb. One Care offers solutions to improve the health of the **INDIVIDUAL PATIENT**.

Pop Care

Products in the Pop Care suite allow providers to track patients, measure progress and analyze data for a specific segment of the population. Pop Care provides insight into **POPULATION HEALTH**.

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A Brief Look Back

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A Program Designed to…

- Improve quality of care

- Provide clinical decision support at no cost to hospital or physicians

- Enhance reimbursement for primary care practices

- Provide more credible and "user friendly" pay-for-value program for physicians

- Provide meaningful information to support early interventions and consistent support to patients with chronic diseases

- Provide timely, actionable knowledge and feedback

- Pave the way for relevant public reporting

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Sound Familiar?

Quality Health First.®
Program

A multi-payer, value-based reimbursement program

- Conceived within the Employers' Forum of Indiana

- Developed by physicians, hospital networks, payers, Indiana State Medical Association, Indiana State Department of Health, and more

- Administered by IHIE in collaboration with Regenstrief

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Why This is Relevant

Quality Health First® Program

- Was a vision of the Employers' Forum
- Demonstrated IHIE's capabilities in analytics
- Focused on value-based care

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Investing in the Present and Future

We are committed to providing services to help our customers address issues in population health.

We've invested in a team of directors and developers to focus on strategic population goals.

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Where We Are Now

Current Population Health Services and Initiatives

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PopCare

- Provide accurate, longitudinal, and robust data
- Track where patient care is delivered
- Access discrete data within EHRs
- Support quality metric efforts
- Manage patient's transition of care

ADT Alerts

Support the patient/primary provider relationship, address appropriate usage of healthcare resources, and ultimately reduce healthcare costs for any managed care organization.

Care Manager

CareWeb access to the INPC for the purpose of analyzing data for a specific segment of the population.

Clinical Value Reports

A customized report to assist your organization in care management for specific populations and quality metric efforts.

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Case Study: Improving Access to Clinical Data

SCENARIO: Large health system wanted to extract left ventricular ejection fraction (EF) data to support MSSP ACO-33

PROBLEM: EF data is buried within free text patient charts and requires extensive manual chart reviews by highly qualified clinical staff

SOLUTION: Regenstrief piloted its nDepth tool to mine and unlock the unstructured EF data within reports and documents in the INPC

RESULTS: The nDepth process took only minutes to perform, significantly improving the accuracy and speed of mining EF data as compared to manual chart review.

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Case Study: Measure and Target Interventions

SCENARIO: Indiana Bioscience Research Institute (IBRI) needed access to data for an Indiana State Department of Health (ISDH) project to measure and target interventions to combat obesity

PROCESS: IHIE extracted the appropriately de-identified data from the INPC in the format that ISDH needed

Step 1
Created data extract within certain parameters, i.e. date range, demographics (age, gender, year of birth, etc.), vitals (height and weight)

Step 2
Coded the results for specific conditions and observations (obesity and diabetes-related factors)

Step 3
Provided raw data file, summary of results, and explanation of methodology

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Where We're Headed

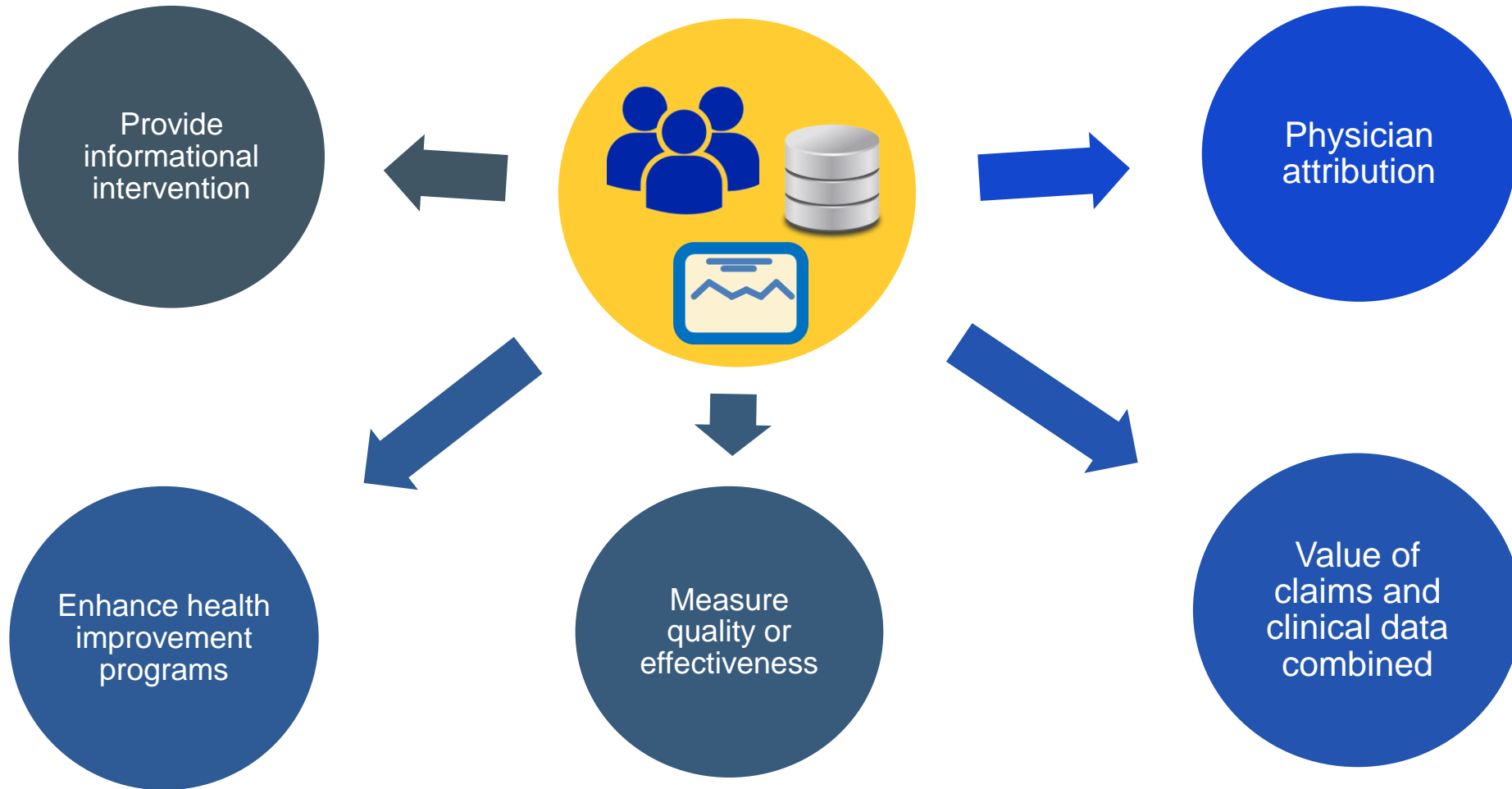Learning from the Past

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What's Different Now?

- We've learned from Quality Health First

- The market has evolved

- There's a renewed industry focus on analytics

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Where IHIE Can Contribute

Provide informational intervention

Physician attribution

Enhance health improvement programs

Measure quality or effectiveness

Value of claims and clinical data combined
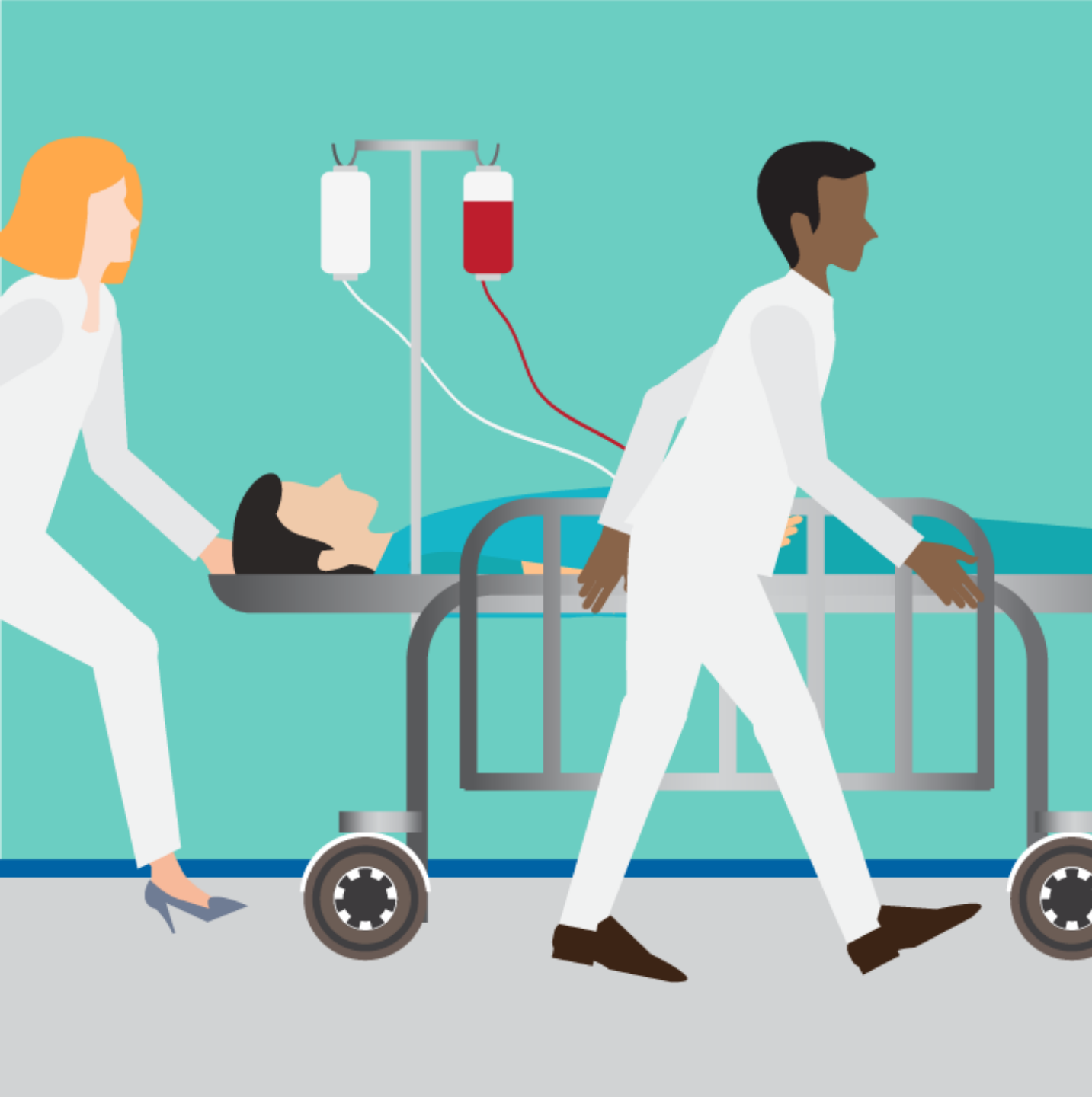
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Discussion

The data of which we are stewards can help solve a number of complex challenges that employers, payers, and providers face.

But we need to understand what those challenges are.

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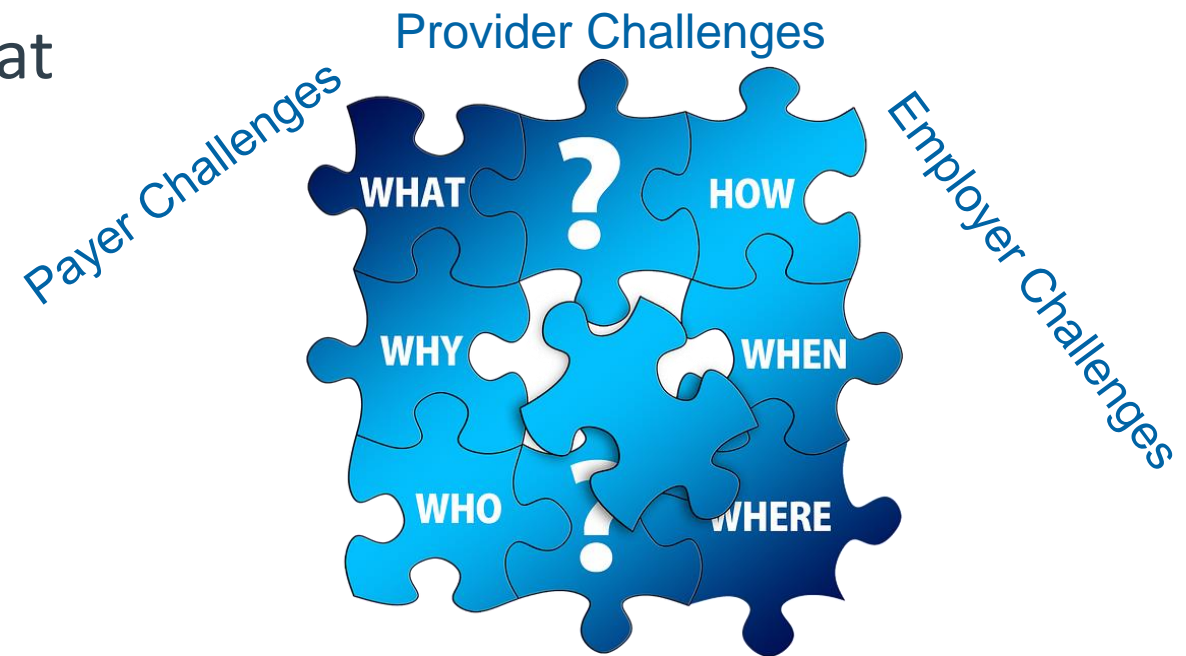
Thank you!

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