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2014 Defense Health Information Technology Symposium

Participation of a Multi Service Market within
a statewide Health Information Exchange



“Medically Ready Force...Ready Medical Force”

DHA Vision



“A joint, integrated, premier system of health, supporting those who serve in the defense of our country.”



“Medically Ready Force...Ready Medical Force”

Learning Objectives



- Identify the benefits of participation in a HIE for healthcare organizations and its beneficiaries.
- Recognize how participation within statewide HIEs can benefit military healthcare organizations.
- Learn the overall requirements for participation within a statewide health information exchange.
- Understand the increase in quality and continuity of care for military health system beneficiaries within healthcare organizations that participate in a HIE.

Agenda



- Colorado Springs Military Health System (CSMHS) at a Glance
- Why HIE within the CSMHS?
- Operational Concept and Defining Success
- Colorado Regional Health Information Organization (CORHIO) at a Glance
- HIE Workflow

Colorado Springs Military Health System (CSMHS) Market Facts



The CSMHS consists of the military treatment facilities of:

- Evans Army Community Hospital (EACH) at Ft. Carson,
- 10th Medical Group Ambulatory Surgical Center at the United States Air Force Academy (USAFA)
- 21st Medical Group at Peterson Air Force Base and Schriever Air Force Base (PAFB).



Colorado Springs Military Health System

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Colorado Springs Military Health System (CSMHS) Philosophy



- Be a single integrated military healthcare delivery system in Colorado Springs
 - The Colorado Springs Military Health System
 - Not three separate systems
- Practice a value agenda throughout the Market where value is defined in terms of patient outcomes and cost savings.
 - All product lines, all administrative process.

Colorado Springs Military Health System (CSMHS) at a Glance



Military Treatment Facilities (MTFs):

☐ **EACH:** Community Hospital

- Enrollment: 73K
- Surgical Specialties, Primary Care, ER
- 28 M/S Beds, 14 MH Beds, **Few IM Specialties (Occupancy Rate of >75%)**

☐ **USAFA:** Large Clinic, Ambulatory Surgical and Primary Care

- Enrollment: 28K

☐ **Peterson:** Medium Clinic, Primary Care Only

- Enrollment: 27K

- Colorado Springs seen as a “Growth” Market
- All Facilities Near/At Capacity
 - 92% Enrollment from all eligible prime
- Highest per capita leakage of all eMSMs
- Growing at a rate of 1K/year

Colorado Springs Military Health System (CSMHS) at a Glance



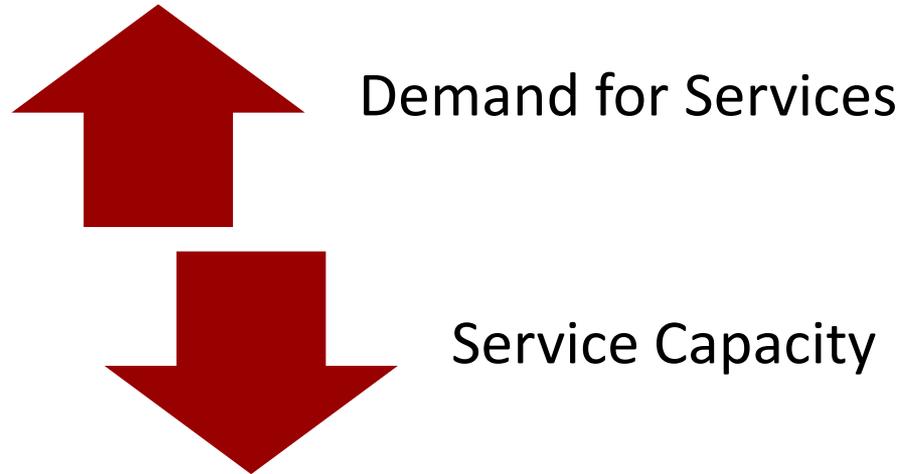
- 172K “Eligible” Patients (1 in 4 of Colorado Springs Population)
 - 11K “Network Prime” + 20K “Standard” = **\$132M/yr**
 - *Target Recapture of Network Prime to MTF Capacity*
- DHP: **FY ‘12: \$629M/yr, \$581M Value (-\$48M, -8%)**
 - \$296M Direct Care/\$285M Purchased (51% DC)
 - **FY ‘13: \$578M Cost/\$588M Value (+\$10M, Even)**
 - \$285M Direct/\$275M Purchased (52% DC)
- DHA Goal: “**Flip The Market**” (2/3 Direct, 1/3 Purchased)
 - **Outcome: \$370M Direct/\$190M Purchased**

Colorado Springs Military Health System (CSMHS) at a Glance



- Pharmacy (# Scripts served):
 - > 5,800/day
- Outpatient Encounters:
 - > 4,000/day
- Radiological Procedures:
 - > 800/day
- Pathology Services:
 - > 2,600/day
- Emergency Room:
 - ❑ Direct Care: >4,500/month
 - ❑ Purchased Care: >3,900/month
- Direct Care Operating Room Cases: > 30/day
- Network Care Inpatient Admissions: > 65/Month
- Over 5,000 Referrals/Month
- Direct Care Births:
 - > 160/Month

Market Imperative: Why HIE? Increasing Demand for Services



Fact: The Colorado Springs market is the least resourced of the six eMSMs with a fraction of the inpatient beds, limited MHS direct care specialty and sub-specialty services and total providers compared to the other five eMSMs.

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Market Imperative: Why HIE? Cost of Out of Network Care



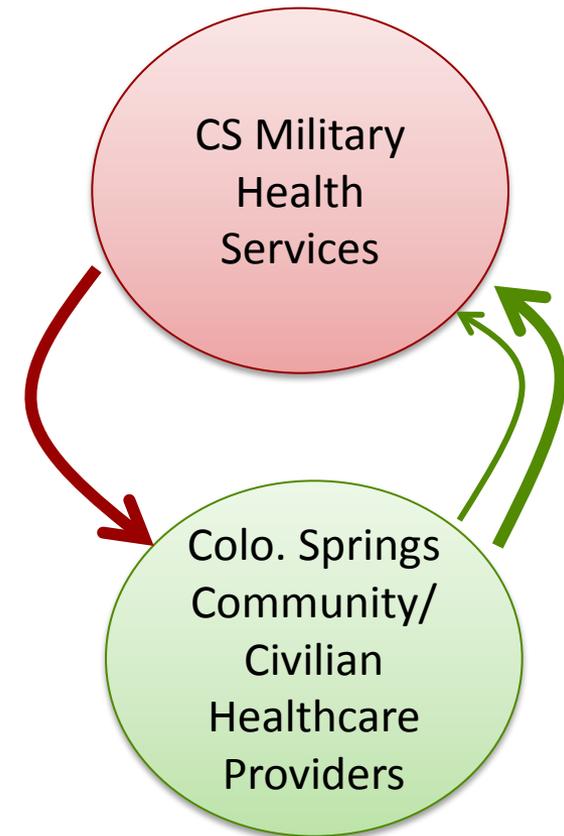
Amount spent in the
purchased care sector
by our enrollees
\$275,000,000

Operational Aspects of Regional HIE Project



CSMHS working with the CORHIO HIE:

- 1. Outbound results delivery:** Allows community/state healthcare providers participating in the regional HIE to access Military Treatment Facilities lab/pathology, radiological and transcribed reports.
- 2. Hospital & ER alerts:** CSMHS care navigators receive a real-time alert (ADT) when a TRICARE managed patient accesses care at a CORHIO participating facility (hospital/ER) [using eligibility file routing]
- 3. Inbound results delivery:** health information recorded by community providers are delivered to CSMHS providers in the Patient Centered Medical Homes



Defining Success



The MHS/CORHIO partnership will:

1. Improve the quality and reduce cost of patient care in the network by reducing redundant diagnostic exams and labs
2. Reduce barriers to care for community referrals, reducing demand/workload on request for records sections and tracking of clear legible reports
3. Provide better real time visibility of civilian facility utilization supporting the Accountable Care Organization model

About CORHIO



Who We Are

- Colorado Regional Health Information Organization
- A nonprofit, public-private partnership
- The state-designated entity for health information exchange (HIE) in Colorado



Vision

- **Shared health information** for all individuals in every Colorado community promoting the **right care**, at the **right time** and the **right place**.

CORHIO By the Numbers



49 Hospitals

- 35 already connected!
- Participating hospitals represent 94% of all hospital beds in the region.

134 Long-Term,
Post-Acute Care Facilities

- One of the highest LTPAC connection rates in the country!

2,700+ Office-based
Physicians/Providers

- 1,900+ already connected!

3,600,000+ Patients
(unique patients)

- Represents 65% of Colorado's total population!

Numbers include health care providers/facilities connected and in implementation

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Labs Participating in HIE



- Cedar Diagnostics
- Colorado Lab Services (CLS)
- LabCorp
- Quest Diagnostics
- Schryver Medical
- UniPath

Bold = Connected to HIE (Live)

Non-bold = Under agreement, in implementation

In Focus: Defining Success



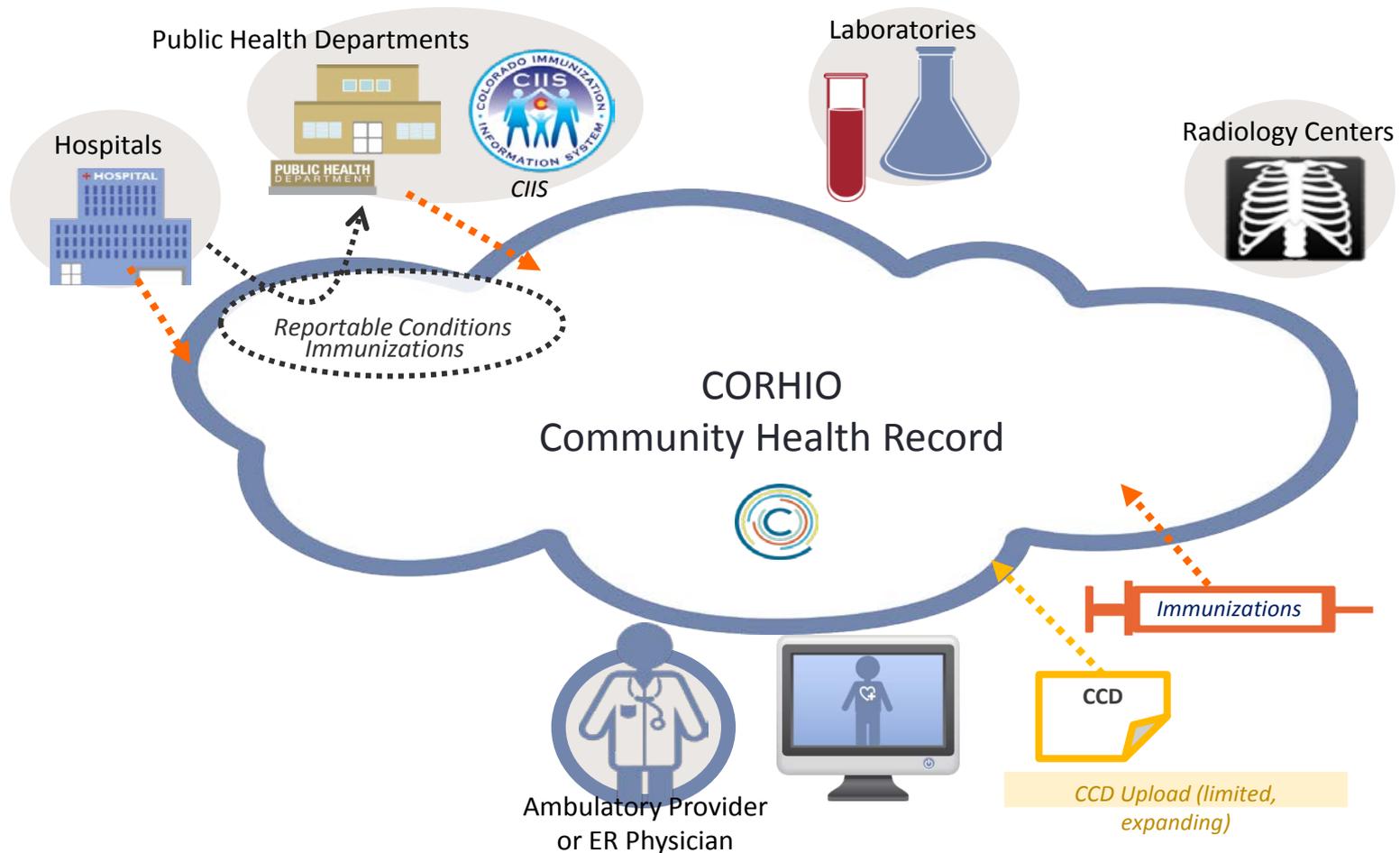
Criteria #1

Improve the quality and reduce cost of patient care in the network by reducing redundant diagnostic exams and labs

- Access to Community Health Record through CORHIO Patient Care 360
- Went Live in Spring 2014

How PatientCare 360[®] Works

(Query-Based HIE)



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HIE Reduces Duplicate Tests

49%

Study:
HIE Reduced the
Number of Outpatient
Lab Tests Performed by
49%



Source:

Study: *Archives of Internal Medicine* 2012;172(6):517-519. doi:10.1001/archinternmed.2011.2104 ([link](#))

News: Modern Healthcare, April 2, 2012 ([link](#))

Success: A Patient Story



59 y/o male arrived to the Emergency Room with Chest Pain and an abnormal EKG. Emergent anticoagulation therapy was initiated and transfer to Memorial Hospital for cardiac cath was arranged. CORHIO's Patient Care 360 was used and it provided the ER doctor with 2 old EKG's with exactly the same morphology. The transfer was held, anticoagulation therapy was held and the patient was admitted to Evans Army Community Hospital instead of Memorial Hospital. Better care, cheaper care, faster care.

Success: A Patient Story 2



36 y/o female arrives to the ER with atypical foot pain and skin changes. Believed to be cellulitis but CORHIO HIE data showed a vascular study from the week prior at Memorial Hospital with clear vascular deficiency. Instead of an admission to Evans Army Community Hospital for Antibiotic treatment, the patient was appropriately diagnosed and transferred to a vascular surgeon at Memorial Hospital. Patient had extremity bypass surgery which saved her leg.

In Focus: Defining Success



Criteria #2

Reducing barriers to care for community referrals, reducing demand/workload on request for records sections and tracking of clear legible reports

- Delivery of discreet clinical information to community providers using HL7 transport
- Delivery of results directly into community provider EHR's or accessible using PatientCare360

Successful HIE Requires Extensive EHR Connectivity Capabilities



Due to the fragmentation of ambulatory EHR market share, an HIE's strength and ability to reach 'critical mass' is dependent upon its ability to create interfaces with a substantial number of EHR products/systems.

CORHIO's Electronic Health Record (EHR) Connectivity Status:

Green: Connected to CORHIO

- Allscripts Pro
- Amazing Charts
- Aprima
- AthenaHealth
- CareTracker/Optum Insight
- Cerner
- CoCentrix (formerly UNI/CARE)
- eClinicalWorks
- e-MDs
- EPIC
- GE Centricity
- Greenway
- HealthTronics
- Health Fusion
- McKesson/Medisoft
- McKesson Practice Partner
- Meditech
- MicroMD
- ModuleMD
- Netsmart
- NextGen
- Red Planet
- Sevocity
- SRSOft /SRS EHR
- Vitera /Intergy

Yellow: In process to connect to CORHIO or verified as being able to connect

- AllMeds
- Allscripts TouchWorks
- Answers on Demand
- CareCloud
- Connexin Software - OfficePracticum
- CureMD
- MacPractice
- Epic
- MediTab
- Point Click Care
- Pulse Systems
- SRSsoft / SRS EHR

Colorado Springs

El Paso & Teller Counties

Population: 628k

Office Based Providers

Participating: 442

Hospitals

Total: 6

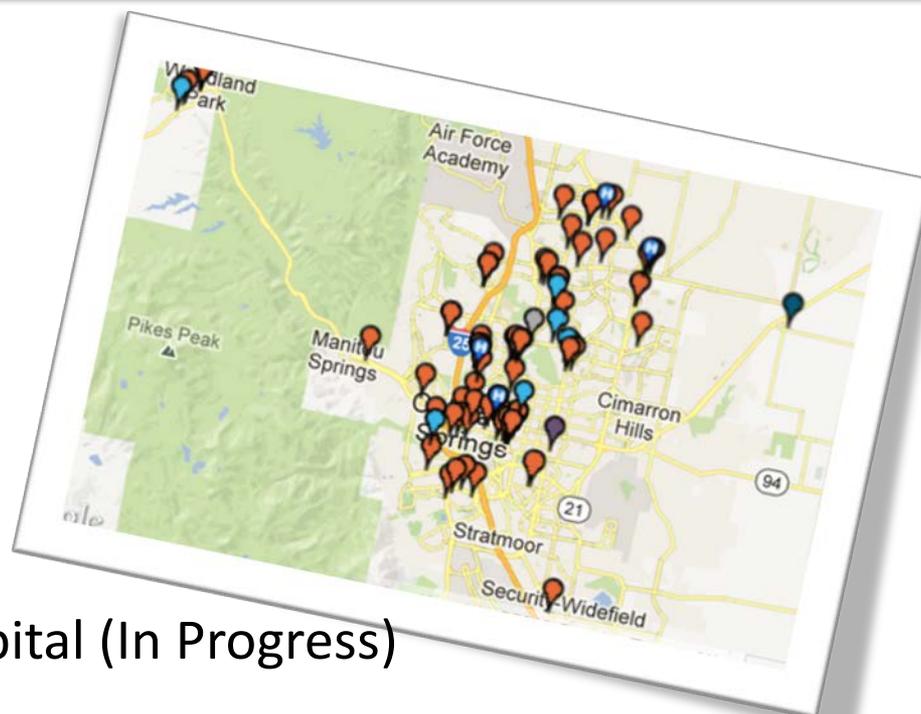
Participating: 5

Evans Army Community Hospital (In Progress)

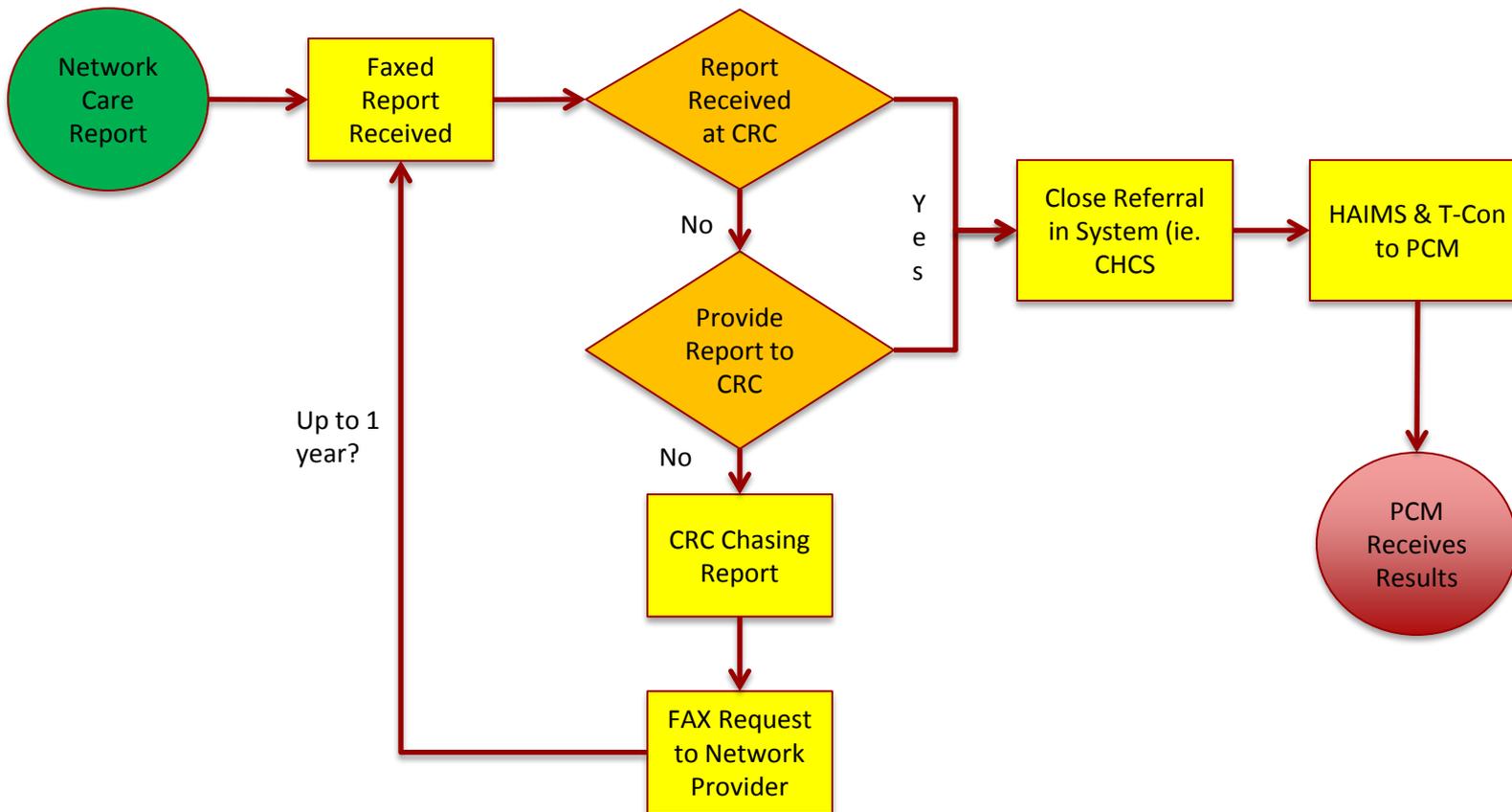
Safety Net

Mental/Behavioral Health Center: Aspen Point

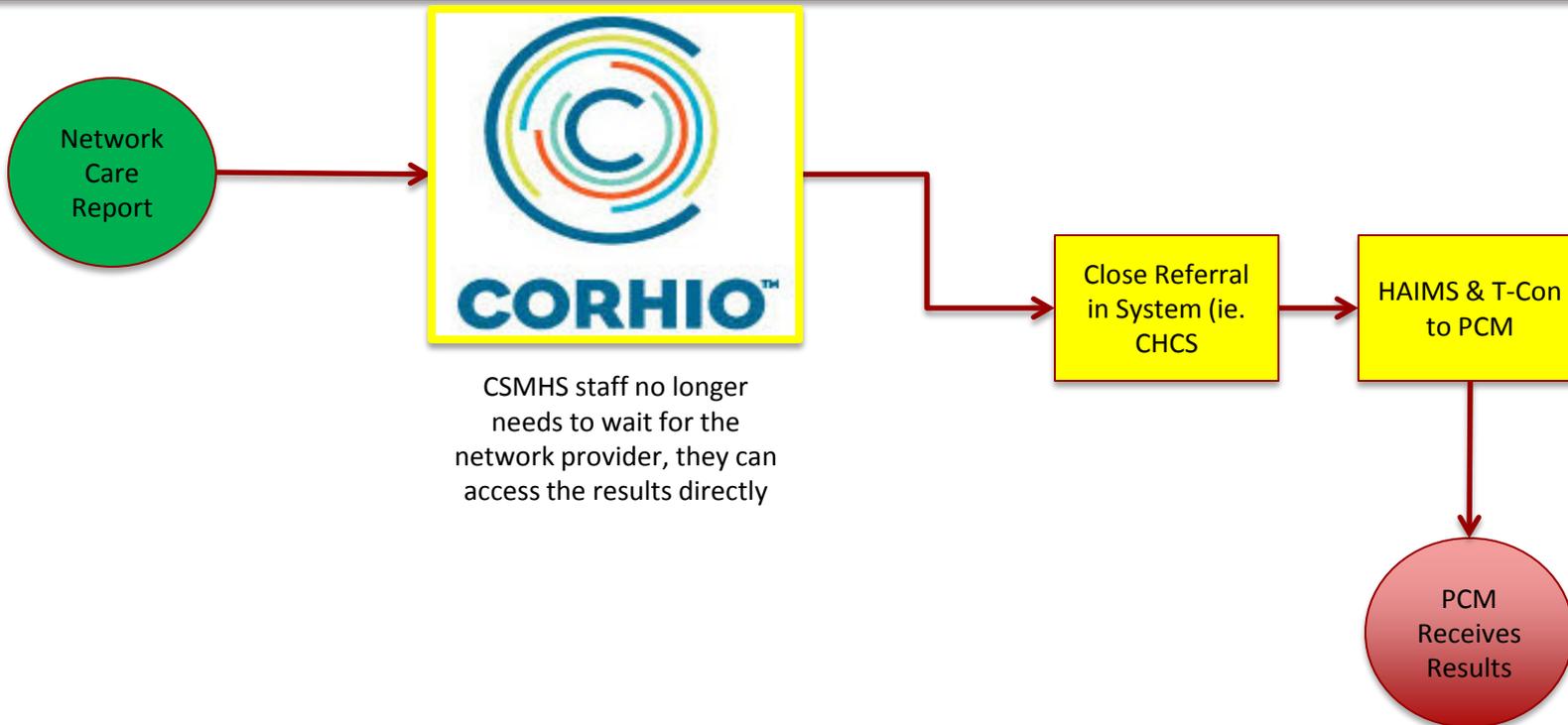
FQHC: Peak Vista



Network Care Results Workflow without HIE



Network Care Results Workflow with HIE



HIE is Improving Efficiency



Organizations Using HIE Reported:

- ✓ *Decreased staff time spent* on clerical administration and filing
- ✓ Ability to *trim staff time* spent on handling lab and radiology results
- ✓ *Spending less* money on redundant tests



Health Information Exchanges Improve Efficiency

Complying with government mandates, developing viable business model are top concerns of HIEs, finds eHealth Initiative.

By [Nicole Lewis](#) InformationWeek
August 04, 2010 02:02 PM

The number of health information exchange initiatives that are transmitting patient data to doctors and other stakeholders has risen from 57 in 2009 to 73 in 2010, a 28% increase, a new eHealth Initiative survey reveals.

"The State of Health Information Exchange in 2010: Connecting the Nation to Achieve Meaningful Use," was published late last month and is eHealth Initiative's latest report on the status of HIEs. Of the 234 active HIE initiatives across the country, 199 organizations responded to the annual survey. The report also noted that the number of HIEs has grown due to the establishment of 56 state designated entities (SDEs); 48 SDEs completed the survey.



Image Gallery: African Hospital Digitizes Medical Records

[\(click for larger image and for full photo gallery\)](#)

More Healthcare Insights

Webcasts

- [How Healthcare Payers are using Customer Communications to Improve Productivity and Effectiveness](#)

- [Learn how Kettering Health Network](#)

The report said more organizations are reporting a reduction in staff time and redundant testing through the use of HIEs. Thirty-three respondents said that using HIEs helped them decrease staff time spent on clerical administration and filing, 30 participants said it helped them trim staff time spent on handling lab and radiology results, and 28 said they spent less money on redundant tests.

The survey also found that HIEs have increased functionality with

Source: Information Week Health Care August 4, 2010 @ <http://www.informationweek.com/news/healthcare/clinical-systems/226500286>

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In Focus: Defining Success



Criteria #3

Provide better real time visibility of civilian facility utilization supporting the Accountable Care Organization model

- Admission / ER alerts routed directly to Providers and CSMHS devices (Vocera) to allow for immediate pre-admission intervention by MHS care navigators
- Reduce Purchased Care Costs

Please complete your evaluations

Contact Information



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This is Your DHA

Title

Thank You For All Your Efforts!



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