



eHEALTH INITIATIVE

Real Solutions. Better Health.

2014 Results from Survey on Health Data Exchange

October 8, 2014

2:00-3:30 pm ET

Housekeeping Issues

- All participants are muted
 - To ask a question or make a comment, submit via the chat feature.
- Audio online at www.readytalk.com
 - If you have technical difficulties call 800.843.9166
- **Download slides and key findings at www.ehidc.org**



About eHealth Initiative

- Since 2001, eHealth Initiative has conducted research, education and advocacy to demonstrate the value of technology in healthcare delivery.
- Our mission is to drive improvement in the quality, safety, and efficiency of healthcare through information and technology. Using technology and data to bring healthcare system into the 21st century.
- Only national, membership organization comprised of 200 of most influential organizations from all health care sectors.
- Patient at the center, not technology for technology's sake.
- Currently crafting the *2020 Roadmap*, a multi-stakeholder solution to enable coordinated efforts by public and private sector organizations to transform care delivery through data exchange and health IT, focused on three areas
 - interoperability;
 - data use and access; and
 - clinical and business motivators.





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2015 ANNUAL CONFERENCE

INTEROPERABILITY: BUILDING CONSENSUS THROUGH THE 2020 ROADMAP

**February 3-5, 2015
Omni Shoreham Hotel
Washington, DC**

Thank you



Agenda

- Welcome and introductions
- Overview of survey findings
 - Jennifer Covich Bordenick, CEO, eHealth Initiative
 - Alex Kontur, Research Analyst, eHealth Initiative
- Reaction panel
 - Randy Farmer, Chief Operating Officer, Delaware Health Information Network
 - Cheryl Krampert, HIE Manager, BayCare Health System
 - Kevin Stambaugh, Director of Physician e-Services, Intermountain Healthcare
 - Christina Galanis, Executive Director, Southern Tier HealthLink
 - David Grinberg, Deputy Executive Director, Pennsylvania eHealth Partnership Authority
- Q&A



About the 2014 Survey

- 11th annual survey
- 125 of 267 identified organizations completed the survey
 - An additional 10 partial responses were included for a total of **135 respondents**
 - 74 community-based HIOs, 25 statewide efforts, 26 healthcare delivery organizations



Background on Respondents

- Who provides them with data?
 - Hospitals (112), ambulatory care providers (100), independent labs (56), community and/or public health clinics (52)
- Who accesses their data?
 - Ambulatory care providers (111), hospitals (104), community/public health clinics (74), behavioral or mental health providers(65)





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Key Findings

2014 Key Findings

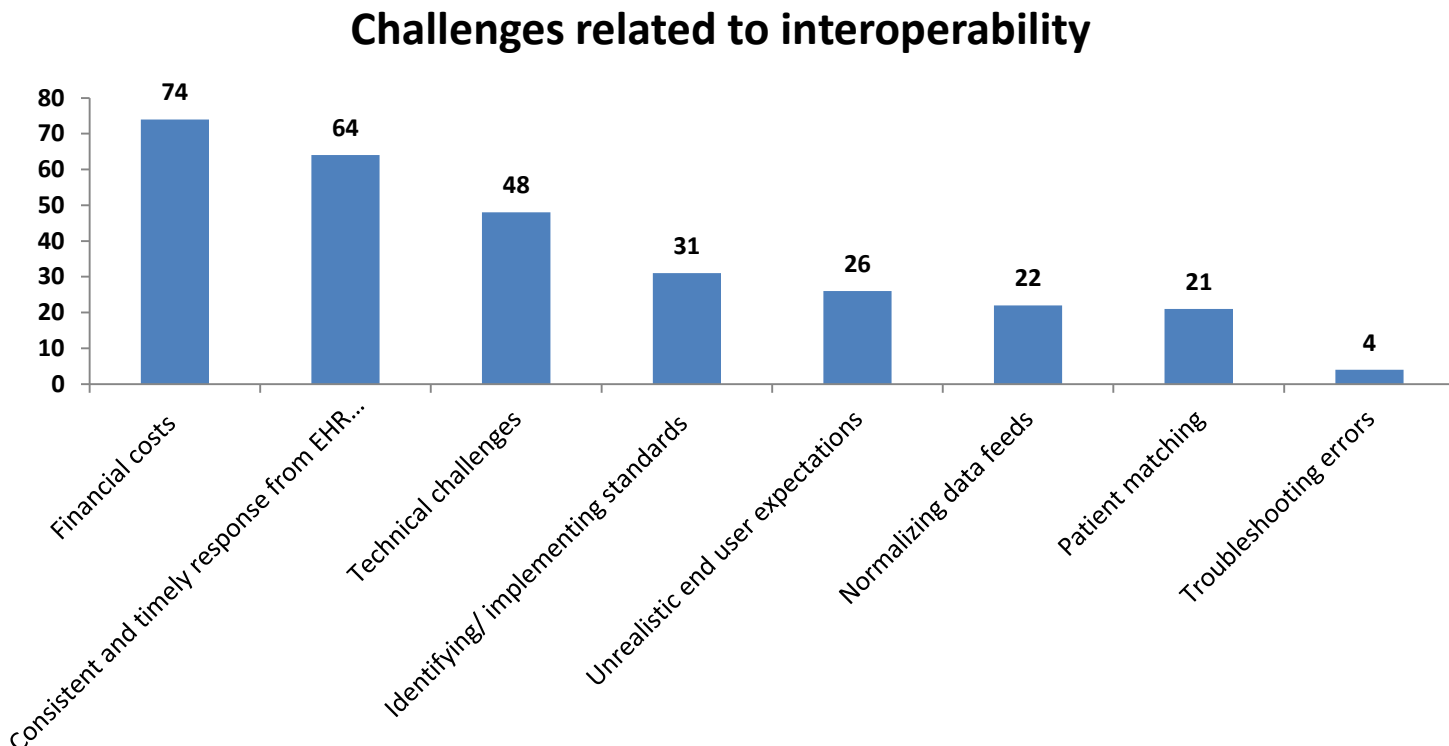
1. Cost and technical challenges are key barriers to interoperability
2. Regulatory policies appear to have prompted increased use of core HIE services such as Direct, care summary exchange, and transitions of care
3. Advanced initiatives are supporting new payment and advanced care delivery models
4. Sustainable organizations have replaced federal funding with revenue from fees and membership dues



Finding 1: Interoperability Challenges

Challenges to interoperability include:

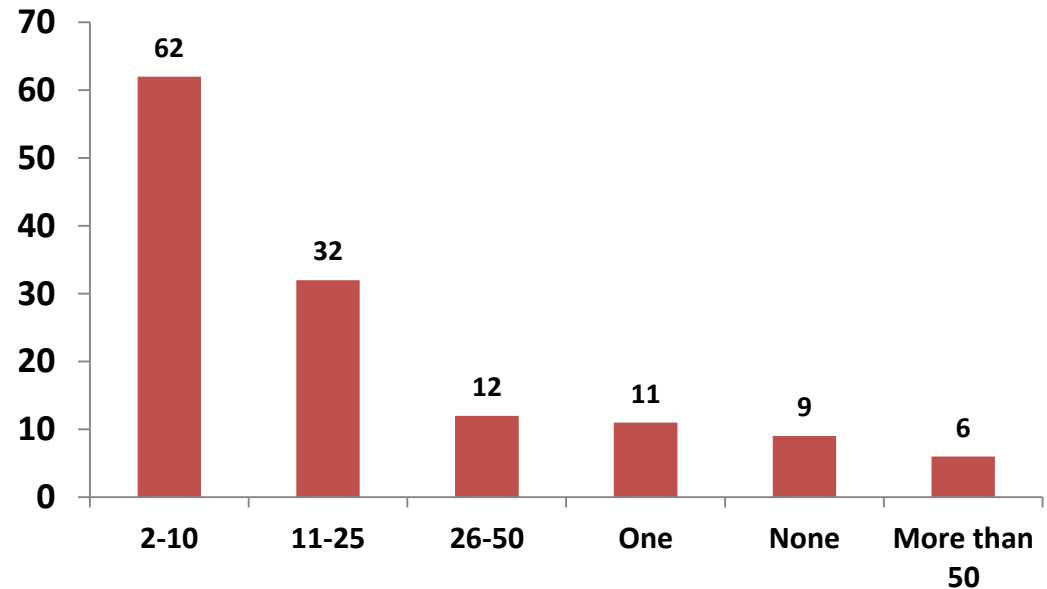
- Financial costs of building interfaces (74)
- Getting consistent and timely response from EHR vendor interface developers (64)
- Technical difficulty of building interfaces (48)



Interoperability Challenges

- As in 2013, respondents continue to struggle with interface development as they work to stitch together disparate systems
- 112 organizations have had to construct multiple interfaces, and 18 have had to construct more than 25 interfaces

How many different EHR vendors are you interfaced with?



Overcoming Interoperability Challenges

- Standardized pricing and integration solutions from vendors (62)
- Technology platforms capable of “plug and play” (54)
- Federally mandated standards (51)
- Cultural changes resulting in a greater desire to share electronic healthcare data (47)
- Greater use among providers of consensus-based standards for data, vocabulary, and transport (43)



Finding 2: Regulatory Policies Prompt Use of Core HIE Services

- Three-quarters of respondents (101) incorporate secure messaging into their data exchange models.
- 81 respondents report their users access data through secure messaging
- 78 respondents offer a Direct address directory
- More respondents indicated that they are using Direct for all given use cases this year than last year:

Use Case	2013	2014
Transitions of care	65	86
Exchange of lab results	29	32
Public health reporting	21	19
Sending info to patients	12	17

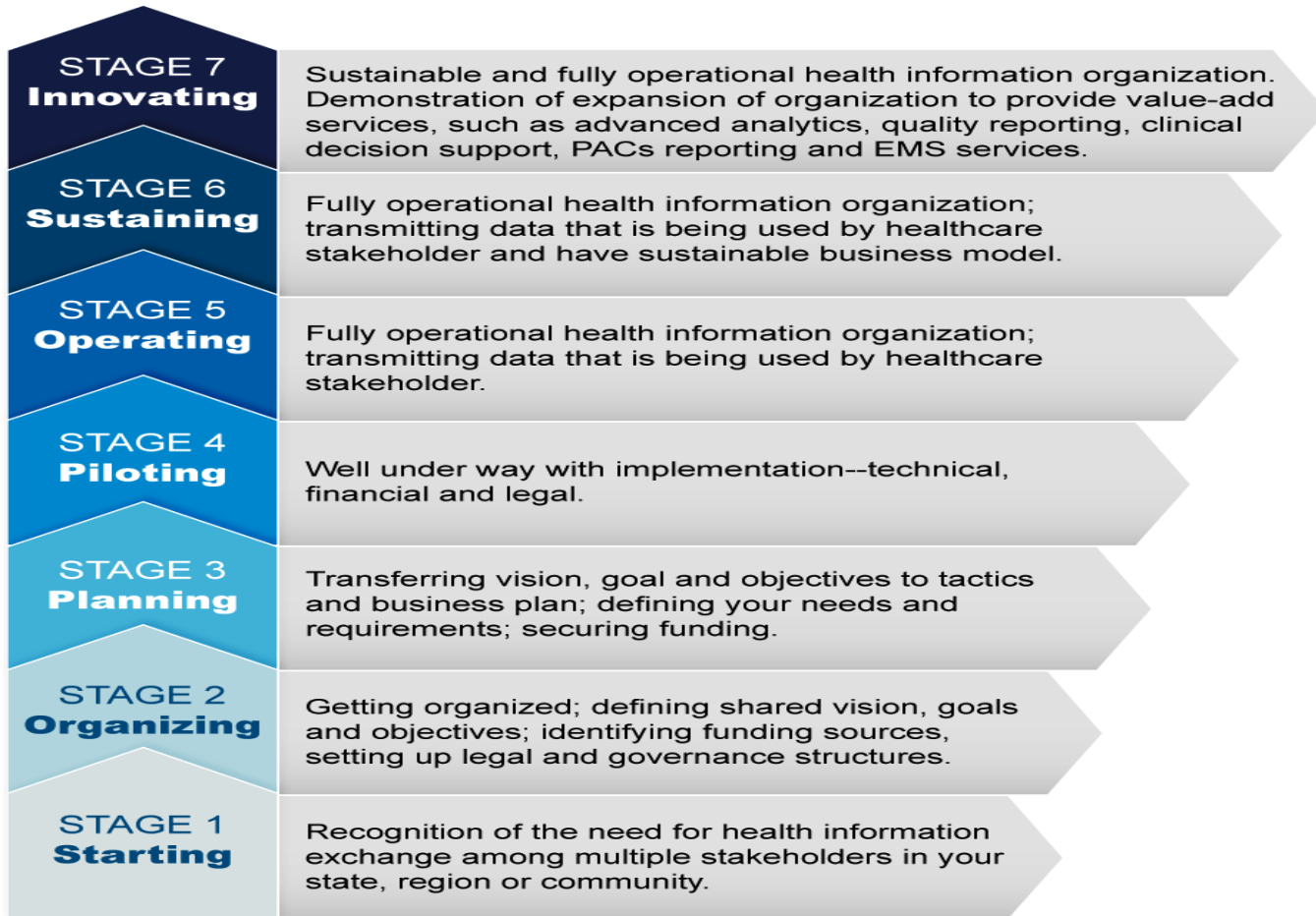


Regulatory Policies

- Impact of stage 2 Meaningful Use:
 - 85 respondents have implemented notification/alerting services to support transitions of care
 - 108 respondents offered care summary exchange as a service
 - 74 respondents offer reporting to immunization registries

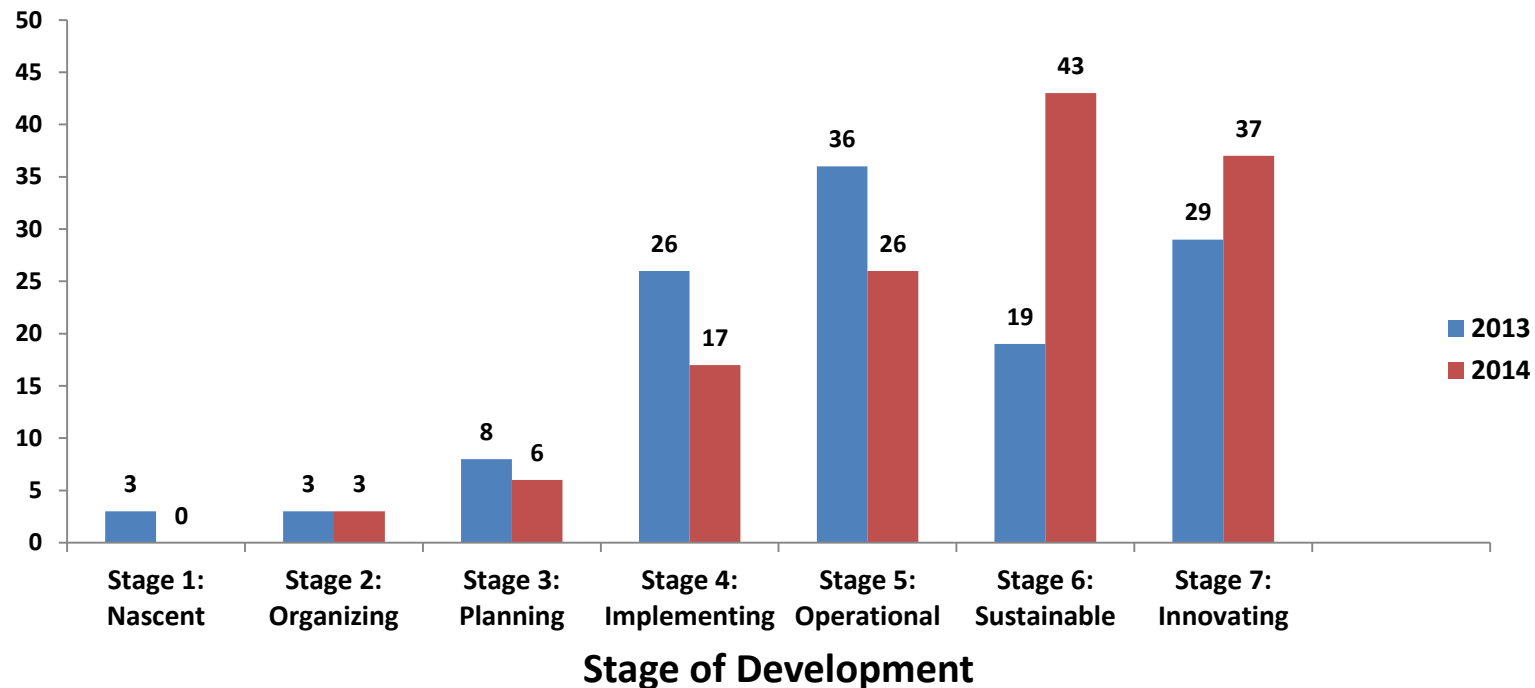


Stages of Development



Finding 3: Advanced Initiatives Are Supporting New Payment & Delivery models

- 106 respondents reported that their organization has reached stage 5 (operating) or higher on eHI's HIE maturity scale.
 - An increase of 11 percent since 2013



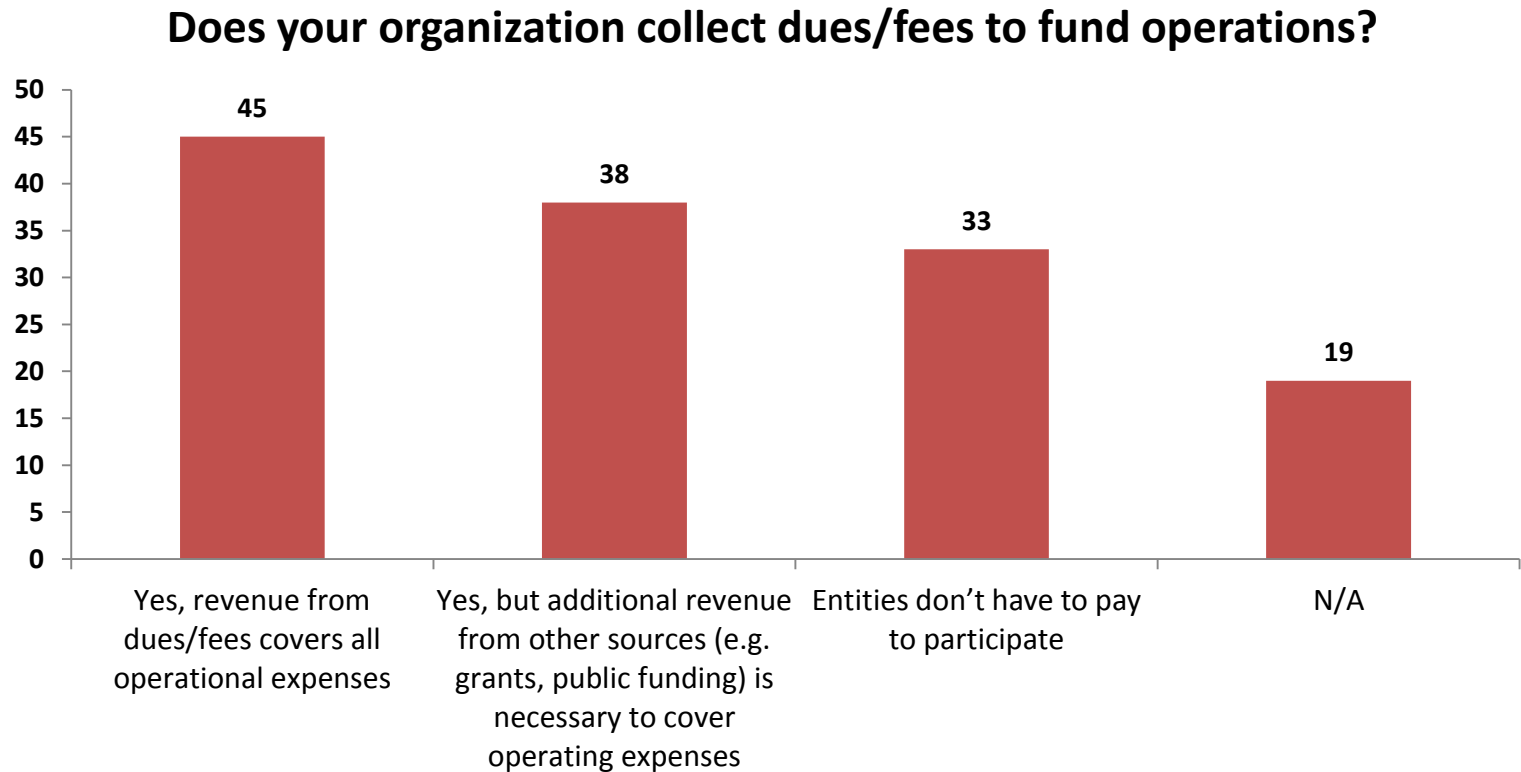
Maturing Initiatives

- 64 support an ACO
- 52 support a patient-centered medical home
- 21 support a State Innovation Model (SIM)
- 12 support a bundled payment initiative



Finding 4: Sustainable Groups Replacing Fed Funding with Fees and Membership Dues

- 45 respondents om dues and fees to completely cover operational expenses
- 38 received funding through dues/fees, although additional funding was needed

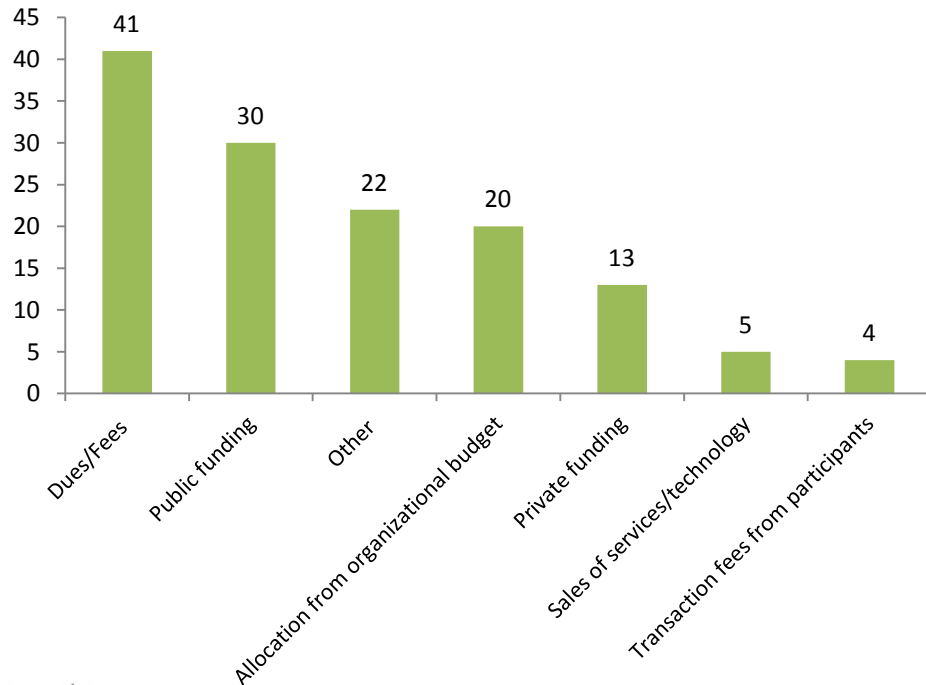


Sustainability

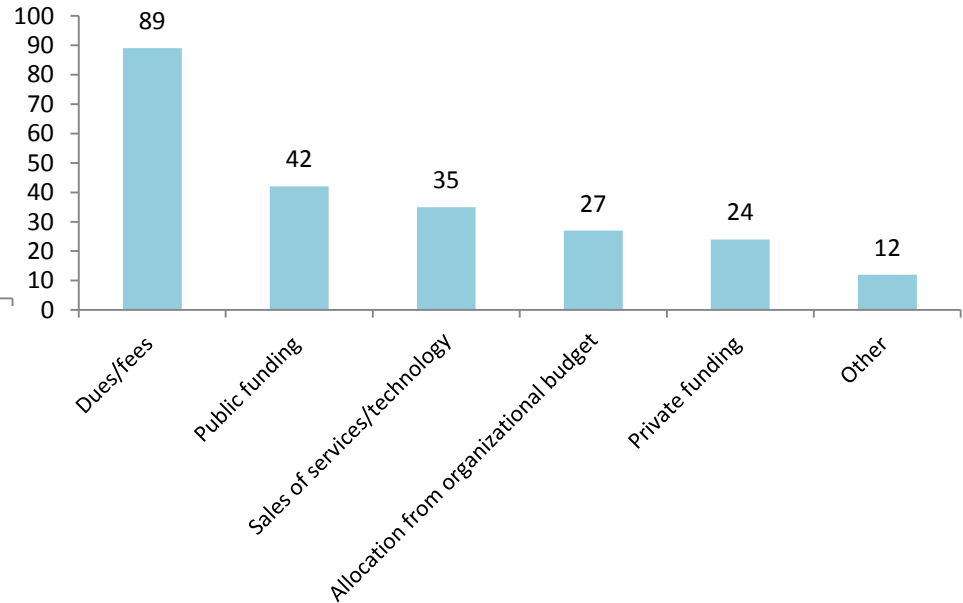
- 41 organizations report that dues or fees are their greatest revenue source

- 89 organizations believe that dues or fees will eventually be their primary revenue stream

Sources of Funding



Which of the following funding sources do you believe is most promising for ensuring the future sustainability of your exchange?



Looking Ahead

- Data exchange is reaching a point of stability and acceptance.
- Organizations are settling on a set of core service offerings and a standard approach to sustainability
 - The long term sustainability of some organizations suggests that certain approaches are meeting market needs
 - Despite the expiration of large funding sources, radical changes in the overall landscape are not evident



Looking Ahead

- As organizations mature, they will offer new and innovative services
 - public health is a stakeholder that has already leveraged health information exchanges to obtain more complete and accurate data
 - alerting/notification services may be linked to the need for ACOs to better track their patient panels
- Organizations are encouraged to work collaboratively to overcome remaining challenges
 - Organizations should work especially closely with regional/community partners to avoid creating an environment characterized by individual pockets of data exchange





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REMINDER

Download slides and key findings at
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Reaction Panel

- Randy Farmer, Chief Operating Officer, Delaware Health Information Network
- Cheryl Krampert, HIE Manager, BayCare Health System
- Kevin Stambaugh, Director of Physician e-Services, Intermountain Healthcare
- Christina Galanis, Executive Director, Southern Tier HealthLink
- David Grinberg, Deputy Executive Director, Pennsylvania eHealth Partnership Authority





Randy Farmer

Chief Operating Officer

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David Grinberg

Deputy Executive Director

**Pennsylvania eHealth
Partnership Authority**

<http://www.paehealth.org/>



Questions for the Reaction Panel?

- Randy Farmer, Chief Operation Officer, Delaware Health Information Network
- Cheryl Krampert, HIE Manager, BayCare Health System
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Thank you

