



# eHEALTH INITIATIVE

Real Solutions. Better Health.



**eHEALTH INITIATIVE**

Real Solutions. Better Health.

# **Ensuring Patient Safety in an Interoperable Healthcare System**

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# Reminder

Please **MUTE** your phones  
(\*6 to mute, \*7 to unmute)

*This call is being recorded.*



# Agenda

## **2:00 – 2:05 PM** Welcome and Introductions

- Moderator:

Meg Marshall, Director of Government Health Policy, *Cerner* & Member, *Health IT Policy Committee, Food and Drug Administration Safety and Innovation Act (FDASIA) Workgroup*

## **2:05 – 2:20 PM** Public Sector Perspective

- Dr. Jon White, Director of Health IT Portfolio, *Agency for Healthcare Research and Quality (AHRQ)*

## **2:20 – 2:40 PM** Industry Perspective

- Kerry McDermott, Senior Director of Health Technology Policy, *West Health*

## **2:40 – 2:55 PM** Q&A Discussion

## **2:55 – 3:00 PM** Updates and announcements of eHI future events.

## **3:00 PM** Adjourn



# Meg Marshall, JD



Director, Government Health Policy, *Cerner*

Member, *Health IT Policy Committee, Food and Drug Administration Safety and Innovation Act (FDASIA) Workgroup*



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# Jon White, M.D.



Director, Health IT Portfolio  
*Agency for Healthcare Research and Quality*  
*(AHRQ)*





U.S. Department of Health and Human Services

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Agency for Healthcare Research and Quality

Advancing Excellence in Health Care • [www.ahrq.gov](http://www.ahrq.gov)

# Improving The Safety of Health IT

**P. Jon White, MD**

**Director, Health IT**

**Agency for Healthcare Research and Quality**

**February 18, 2014**



# AHRQ's New Mission

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To produce evidence to make health care safer, higher quality, more accessible, equitable, and affordable, and to work with HHS and other partners to make sure that the evidence is understood and used.





# 2014 Priorities

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- Improve health care quality by accelerating implementation of Patient Centered Outcomes Research
- Make health care safer
- Increase accessibility by evaluating Affordable Care Act coverage expansion
- Improve health care affordability, efficiency, and cost transparency

# Unique Role in Health IT

- Anticipates the future needs of the health care system and supports development of innovative health IT solutions
- Identifies and fills current gaps in knowledge about health IT
- Leverages the capability of health IT to improve the quality, safety, efficiency and effectiveness of healthcare





# Improving the Safety of Health IT: Health IT Hazard Manager

2012  
Version 2

## HIT Hazard Manager

Welcome Howard Naulty!  
ECRI Institute [ [Log Off](#) ]

Home Admin Hazards Reports My Account

**Hazard #1291**

Created: 4/24/2012 8:27 AM Updated: 4/25/2012 10:28 AM  
Created by: Howard Naulty Updated by: Howard Naulty

Not all categories may be applicable. If something is not applicable, leave it blank.  
When entering a Hazard, use the tabs to navigate back and forth. Do not use the back button.

1. Description 2. Systems Involved 3. Discovery 4. Causation 5. Impact 6. Hazard Control Plan 7. Plan Approval 8. Notes & References

**How was the hazard discovered?** (Check all that apply.)

- Local IT Implementation and Testing (DBV)
- Value-Added Reseller
- End-User Report (any clinician)
- Automated Error Log
- Patient or Lay-Caregiver Report
- Vendor Reported (any vendor)
- Chart Review
- Retrospective Analysis
- Other (specify)

**Stage of Discovery** (Check all that apply.)

- Software Specification
- Vendor Programming
- Customer Configuration
- Customer Programming
- Testing
- Training
- Initial Go-Live
- Production Use
- Upgrade

**How long was this hazard present in the system when it was discovered? (fill in one)**

Hours (Up to 23):   
Days (Up to 30):   
Weeks (Up to 51):   
Months:

**How was the hazard communicated?** (Check all that apply.)

- Communicated internally
- Reported to software vendor
- Published report (including electronic publication)
- Informal communication with vendor user group

**When was the hazard discovered?** 4/10/2012 02:00

**Save Hazard and Exit**

“To protect America’s health, health IT must be designed and used in ways that maximize patient safety while minimizing harm.”





# 2014 Omnibus Appropriation

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- “...includes \$4,000,000 for AHRQ to research safe health IT practices specifically related to the design, implementation, usability, and safe use of these systems.”
- “The Committee hopes that this investment will generate new evidence on safe health IT practices that would ultimately be used by ONC, FDA, CMS, and others to inform certification and other policy interventions.”



# Funding Opportunity: Research Grants

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- Special Emphasis Notice: Applications due March 28th
- Post-deployment safety testing of EHRs for high prevalence, high impact EHR-related patient safety risks
- Design, implementation, usability, and safe use of health IT by all users, including patients;
- User-centered design and human factors principles applied to health IT to improve safety;
- The use of sociotechnical systems associated with health IT to improve safety; and
- Impact of policy decisions on the safe use of health IT use in clinical practice.
- <http://grants.nih.gov/grants/guide/notice-files/NOT-HS-14-007.html>



## Funding Opportunity: Exploratory/Developmental Research Grants

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- Special Emphasis Notice: Applications due March 28<sup>th</sup>
- Clinical patient safety: Clinical patient safety topics impacted most by health IT.
- EHR system integrity: Frequency of and optimal mitigation strategies for EHR downtimes.
- Health IT safety reporting: Optimal health IT patient safety reporting strategies.
- <http://grants.nih.gov/grants/guide/notice-files/NOT-HS-14-008.html>



U.S. Department of Health and Human Services

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**Thank You!**

**[jonathan.white@ahrq.hhs.gov](mailto:jonathan.white@ahrq.hhs.gov)**

**301-427-1171**



# Kerry McDermott



Senior Director, Healthcare Technology Policy  
*West Health*





# Overview

February 2014

# U.S. HEALTH CARE THE COST PROBLEM

## THE REALITY OVERALL SPENDING

**\$2.7 Trillion**  
(2011)

## HEALTH CARE AS SHARE OF GDP



## PER CAPITA SPENDING



## THE DRIVERS

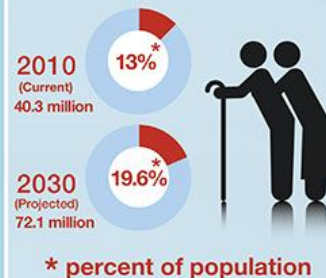
In the ten-year period between 2001 and 2011 U.S. health care spending nearly doubled, climbing from **\$1.5 trillion** to **\$2.7 trillion**

**Chronic Disease**  
**\$2 Trillion**  
Annual Cost (2009)  
**\$3 out of every \$4 of U.S. health care spending**



### Aging Population

People Ages 65+ 1 in 8 Americans



### Hospital Readmissions (2011)

Nearly 1 in 5 patients readmitted in 30 days  
**Estimated Preventable Cost Burden \$25B annually**

### Physician Shortage

Projected Shortages by Year



All Data U.S. from California HealthCare Foundation, Congressional Budget Office, U.S. Centers for Disease Control, AAMC, and NEHI.

Source: Gary and Mary West Health Institute

# About Gary and Mary West

- Hailing from Omaha, Nebraska, Gary and Mary West are entrepreneurs and philanthropic pioneers with a commitment to creating an entirely new ecosystem to lower healthcare costs
- The couple's passion is rooted in their experience building a world-class company with more than 40,000 employees, which made them acutely aware of the pressing need to do something about the rising and unsustainable cost of health care in the United States
- The Wests have founded numerous companies over the last four decades, including West Corporation, which became one of the largest customer relationship management providers in the world with more \$3.5 billion in annual sales
- In November 2006, Gary and Mary West created the Gary and Mary West Foundation located in Carlsbad, California





GARY & MARY  
**west foundation**<sup>™</sup>  
EST. 2006

The Gary and Mary West Foundation seeks to significantly improve the lives of low-income seniors and disadvantaged young people in our community and lower the cost of health care in our country through purposeful philanthropic investment.



**Lowering the Cost of Health Care**



**Senior Wellness**



**Youth Employment**



**Service Canines**

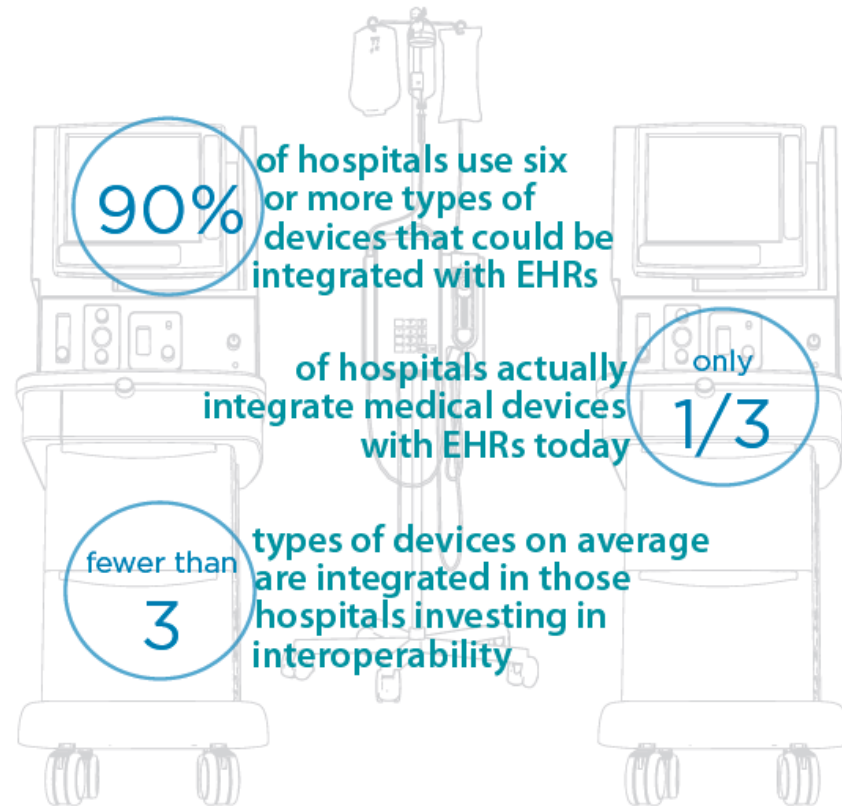
# West Health is four organizations with a shared mission to lower healthcare costs



- \* Gary and Mary West fund the West Health entities personally or through the Gary and Mary West Foundation and the Gary and Mary West Health Endowment. Gary and Mary West will never benefit financially from any West Health activities.
- \* All financial returns from the Fund are reinvested into the charitable efforts of West Health.

# Interoperability

**Interoperability:**  
*The ability for health information to be seamlessly shared across medical devices and enterprise systems for the purpose of optimizing health care*



HIMSS Analytics. Medical devices landscape: current and future adoption, integration with EMRs, and connectivity





# Need for Medical Interoperability



- **IOM: Best Care at Lower Cost**

- “. . . Interoperability needed to support better care, system improvement, and the generation of new knowledge.”

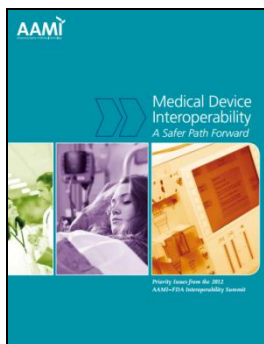
<http://www.iom.edu/Reports/2012/Best-Care-at-Lower-Cost-The-Path-to-Continuously-Learning-Health-Care-in-America.aspx>



- **ECRI: Top 10 Health Technology Hazards**

- # 5 Interoperability failures with medical devices and health IT systems

<https://www.ecri.org/Forms/Pages/ECRI-Institute-2013-Top-10-Hazards.aspx>



- **AAMI/FDA Summit on Interoperability**

- “Misaligned incentives and a lack of standardization are just some of the barriers to interoperability...”

[http://www.aami.org/news/2012/100312\\_AAMI\\_FDA\\_Summit\\_Interoperability\\_Challenges.html](http://www.aami.org/news/2012/100312_AAMI_FDA_Summit_Interoperability_Challenges.html)


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# Value of Medical Device Interoperability

MARCH 2013

THE VALUE OF  
MEDICAL DEVICE  
INTEROPERABILITY:

Improving patient care  
with more than \$30 billion  
in annual health care savings

 westhealth™  
institute

 @westhealth | #interoperability westhealth.org

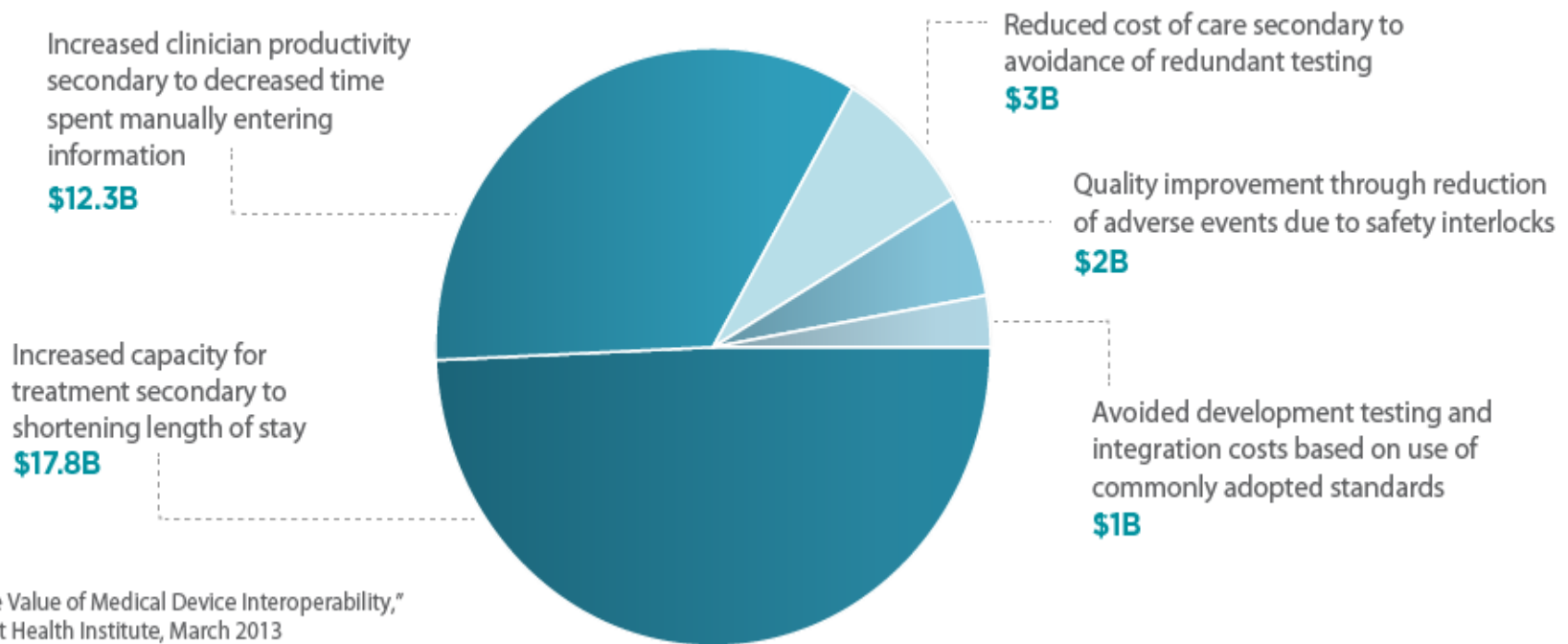
Analysis coordinated by West Health Institute finds medical device interoperability could save more than \$30 billion a year

[www.westhealth.org/institute/interoperability](http://www.westhealth.org/institute/interoperability)

# Over \$30 billion in estimated savings from medical device interoperability

## Estimated Savings from Medical Device Interoperability

#interoperability



"The Value of Medical Device Interoperability,"  
West Health Institute, March 2013



The Center for Medical Interoperability seeks to optimize patient care by advancing the safety, quality and affordability of U.S. healthcare delivery. It will accomplish this by serving as a focal point for hospitals and health systems to drive rapid, widespread, sustained interoperability of medical technology.

# Center Activities

Neutral environment for health system stakeholders to identify technical solutions

Develop common standards-based architectures, specifications and reference designs

Steward protocols for testing and certifying that requirements are fulfilled

Build trust – confidence that interoperable technologies will work as expected





# Discussion

To ask a question or make a comment,  
submit via the chat feature.





# eHI RECEPTION at the HIMSS Conference

**JOIN US for a  
MARDI GRAS  
RECEPTION!**

- **What?**

eHI Reception at HIMSS Annual  
Conference

- **Where?**

ROSEN CENTRE SALON 16

- **When?**

February 24, 2014  
6:00 pm - 8:00 pm





# NATIONAL FORUM ON DATA & ANALYTICS



May 21-22, 2014 | Washington, DC

**REGISTER NOW** 

**Meet & network with your fellow  
workgroup members!**

*Join hundreds of researchers, industry leaders, providers, payers and more  
focused on the use of analytics to improve clinical, financial and  
administrative decisions at critical points in the healthcare system.*

**FORUM INFO AVAILABLE AT:**

**<http://ehidc.org/events-landing/daf-2014>**

# About eHealth Initiative

- Since 2001, eHealth Initiative is the only national, non-partisan group that represents all the stakeholders in healthcare. Represent over 15 different stakeholder groups and 39 states across the nation.
- Mission to promote use of information and technology in healthcare to improve quality, safety and efficiency.
- Last year, over 4500 individuals attended our events and 500+ individuals participated in our national councils and workgroups
- eHealth Initiative focuses its research, education and advocacy efforts in four areas:
  - Data and Analytics
  - IT Infrastructure to Support Accountable Care
  - Technology for Patients with Chronic Disease
  - Data Exchange & Interoperability





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