Provider Perspectives on Patient Information: Results of 2017 Survey

October 19, 2017

Agenda

- Welcome and Introductions
  - Jennifer Covich Bordenick, CEO, eHealth Initiative
- Comments from National Coordinator for Health Information Technology
  - Don Rucker, MD, National Coordinator for Health Information Technology, U.S. Department of Health and Human Services (HHS)
- Review of Survey Results
  - Jennifer Covich Bordenick, CEO, eHealth Initiative
- Discussion & Perspective
  - Jon Zimmerman, VP and General Manager, Value-based Care Solutions, GE Healthcare Digital
  - Christopher Muir, Office of Standards and Technology, Office of the National Coordinator, HHS
- Q & A

Housekeeping Issues

- **All participants are muted**
  - To ask a question or make a comment, please submit via the Q&A feature and we will address as many as possible after the presentations.

- **Technical difficulties:**
  - Use the chat box and we will respond as soon as possible

- **Today's slides will be available for download on eHI's Resource page www.ehidc.org/resources**

Our Mission

eHealth Initiative's mission is to serve as the industry leader convening executives from multi-stakeholder groups to identify best practices to transform healthcare through use of technology and innovation. eHI conducts, research, education and advocacy activities to support the transformation of healthcare.

Multi-stakeholder Leaders in Every Sector of Healthcare

Convening Healthcare Executives

Research & Identify Best Practices

Best Practice Committees Identify & Disseminate Success Stories

INTEROPERABILITY

DATA ACCESS & PRIVACY

PATIENT & PROVIDER TECHNOLOGY ADOPTION

DATA ANALYTICS

eHealth Resource Center Available With Best Practices & Findings

Best Practice Committees contribute to the eHealth Resource Center **www.ehidc.org/resources** which provides assistance, education and information to organizations transforming healthcare through the use of information, technology and innovation. The Resource Center is a compilation of reports, presentations, survey results, best practices and case studies from the last 16 years.

February 7 – 8, 2018
Top of the Hill, Washington, DC

eHealth Initiative Executive Summit: 2020 Roadmap Refresh

C-Level Executives Invited to Join

eHealth Initiative Foundation thanks GE Healthcare for their support of this webinar and other educational programs.

Comments from Dr. Don Rucker, National Coordinator for Health Information Technology (ONC) HHS Office of the Secretary

Meet the Speakers

Christopher Muir, Office of Standards and Technology, Office of the National Coordinator

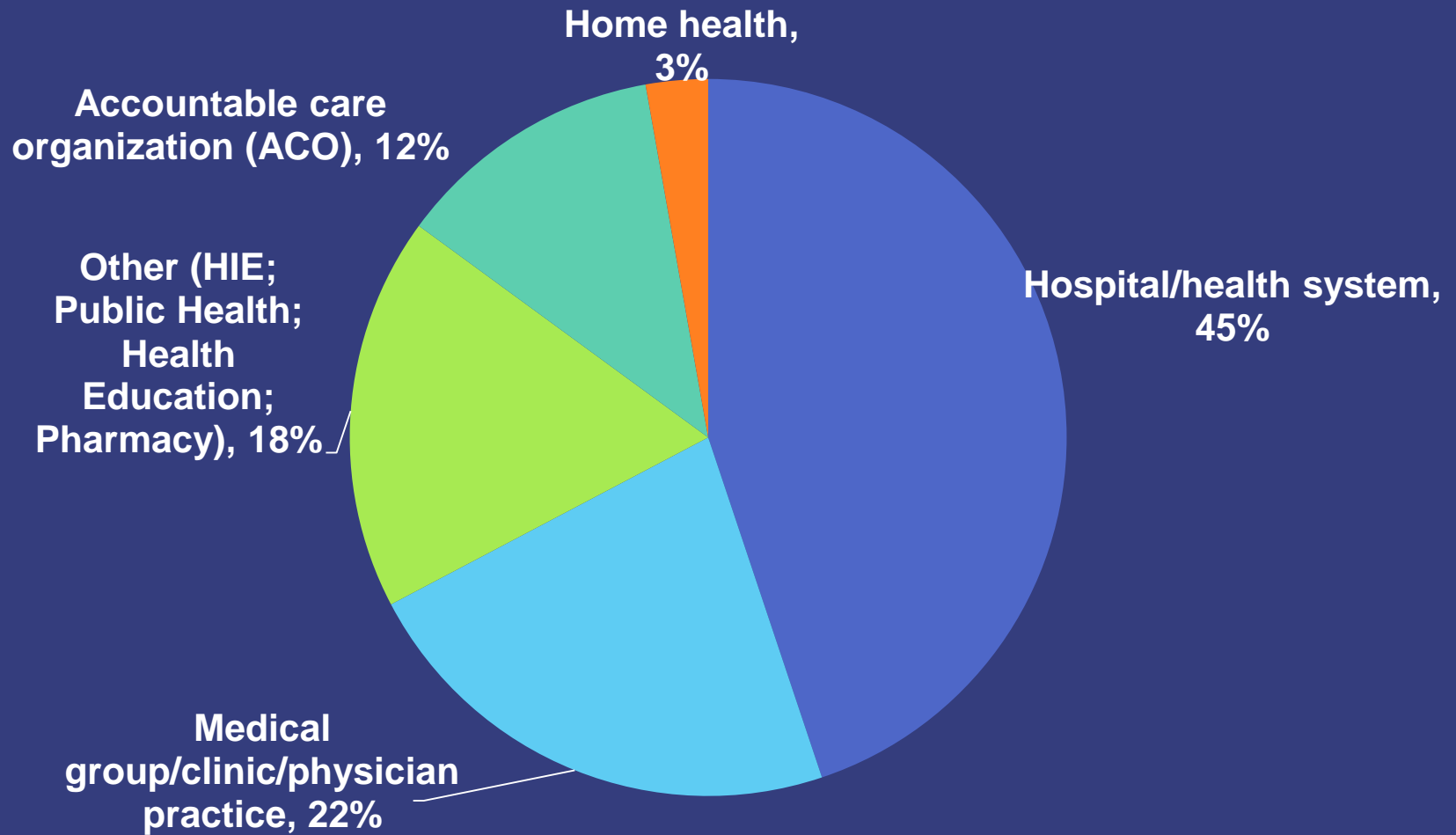Jennifer Covich Bordenick, CEO, eHealth Initiative

Jon Zimmerman, VP and General Manager, Value-based Care Solutions, GE Healthcare Digital

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Survey Methodology

- Non-scientific survey providing a snapshot of industry perspectives and state of the field
- 107 respondents
- 24 multiple-choice and open ended questions
- Sent four e-mail blasts including a link to the survey to list of over 20,000 eHI contacts, including ACOs, provider organizations, and HIEs
- Incentives were offered to initial respondents
- Survey was open for two weeks and closed September 22, 2017

Respondent Demographics
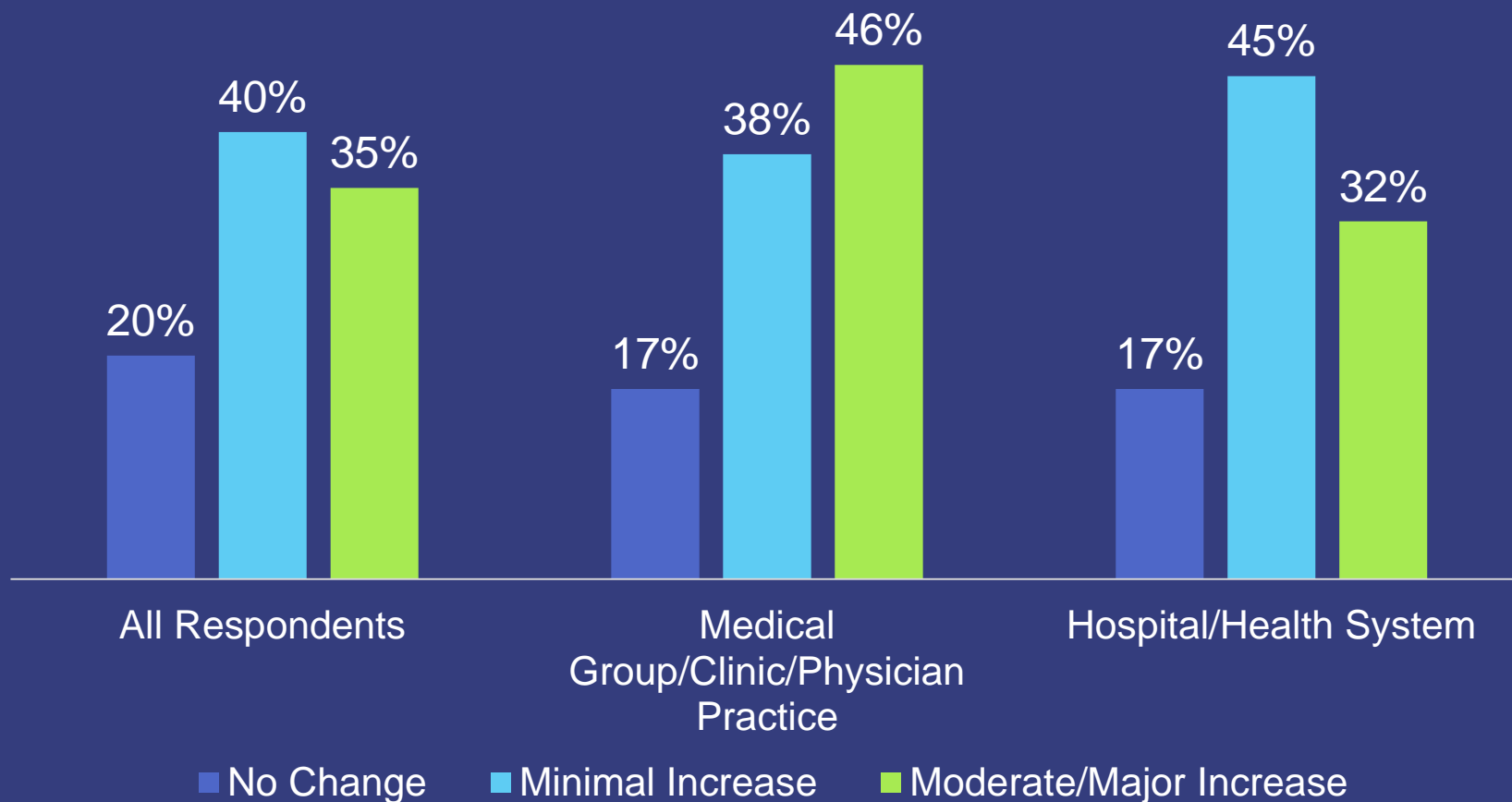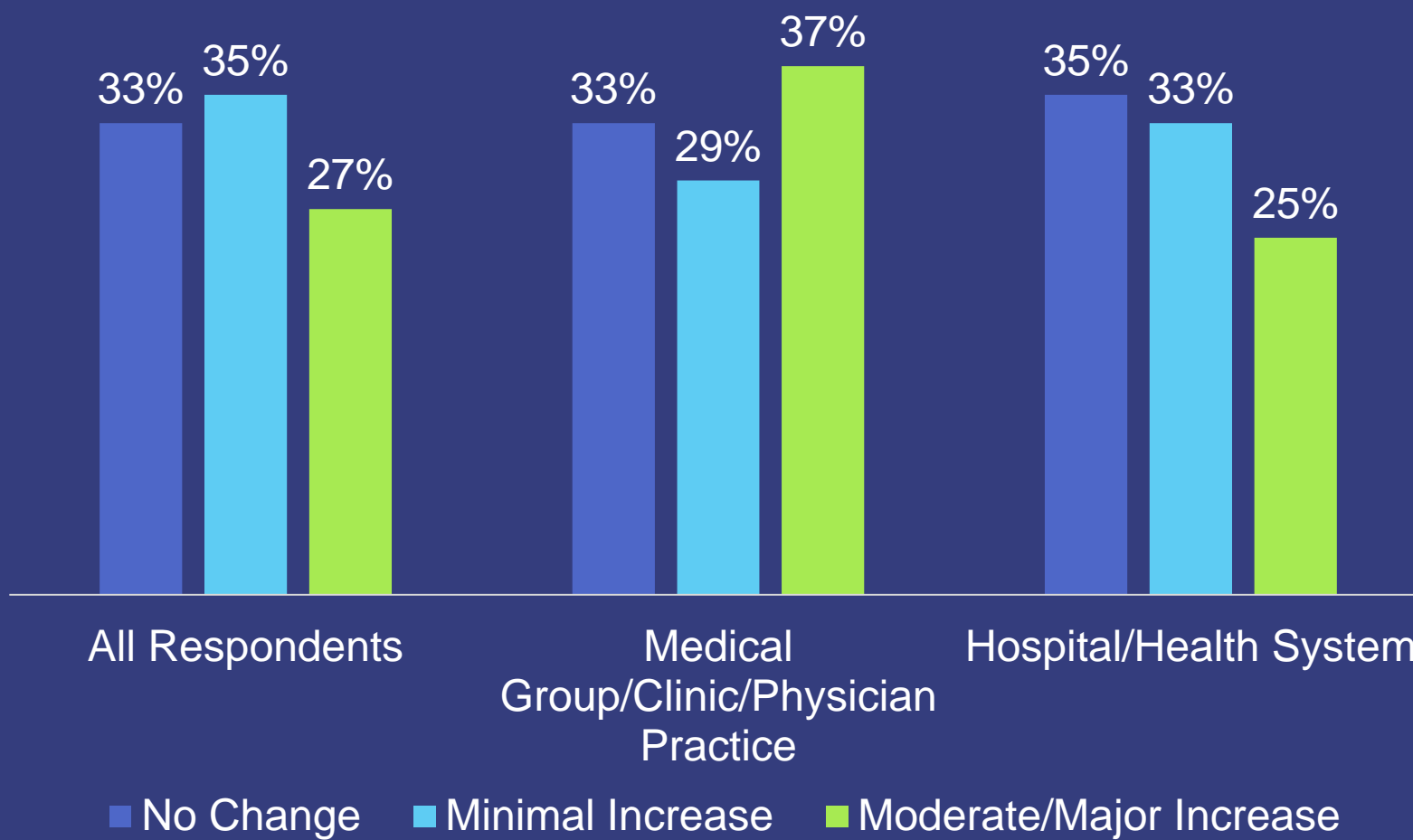

Pie chart showing respondent demographics:
- Home health, 3%
- Accountable care organization (ACO), 12%
- Other (HIE; Public Health; Health Education; Pharmacy), 18%
- Hospital/health system, 45%
- Medical group/clinic/physician practice, 22%

Respondent Demographics: Function Within Organization

Function within Organization	Percentage of Respondents
Executive leadership	21%
IT leadership	19%
Clinical staff	11%
Administrative leadership	10%
Other	9%
Clinical leadership	8%
IT staff and finance	7%
Administrative staff	6%
Not applicable	6%
Finance/Revenue cycle leadership	4%

Are More Patients Asking to See Their Data?

	No Change	Minimal Increase	Moderate/Major Increase
All Respondents	20%	40%	35%
Medical Group/Clinic/Physician Practice	17%	38%	46%
Hospital/Health System	17%	45%	32%

■ No Change ■ Minimal Increase ■ Moderate/Major Increase

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GE

What Types of Information do Patients Want to Share with other Clinicians?

Data Types		
Lab information	68%	Patient acting as own HIE
Imaging results	56%	
Prescription Information	51%	
Blood pressure readings	36%	
Diabetes monitoring data	34%	
Other provider reports	27%	
Weight readings	16%	Patient acting as data source
Medication adherence data	15%	
Exercise data, i.e. information from Fitbit or other wearable devices	12%	
Diet tracking/food diaries	8%	

Impact of Increased Access to Patient Information

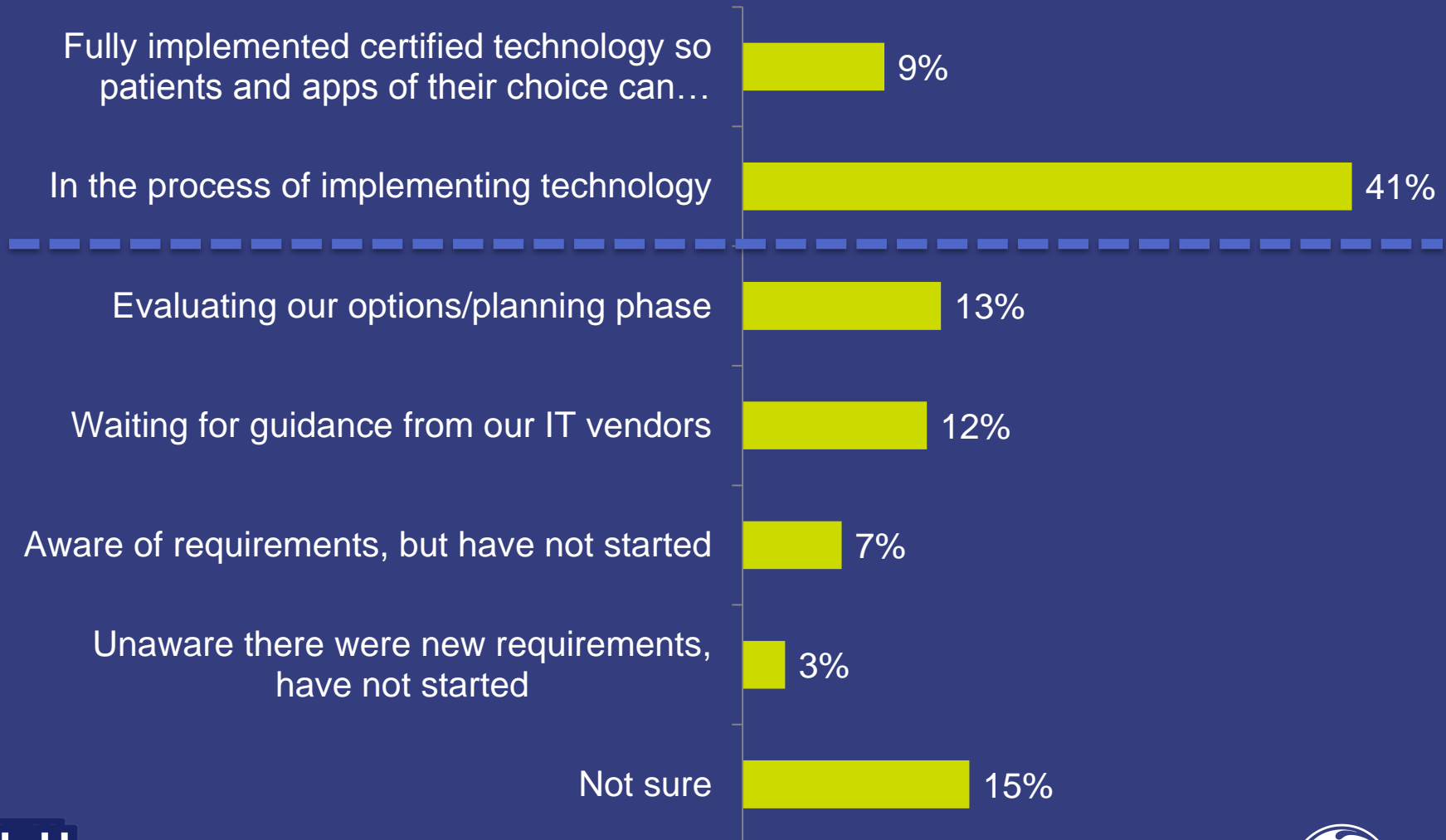| Category	Percentage
Improve patient engagement in their care	75%
Improve quality of care	65%
Improve patient satisfaction	62%
Reduce cost	38%
Increase cost	21%
Reduce quality of care	5%
Reduce patient satisfaction	2%
Reduce patient engagement in their care	1%
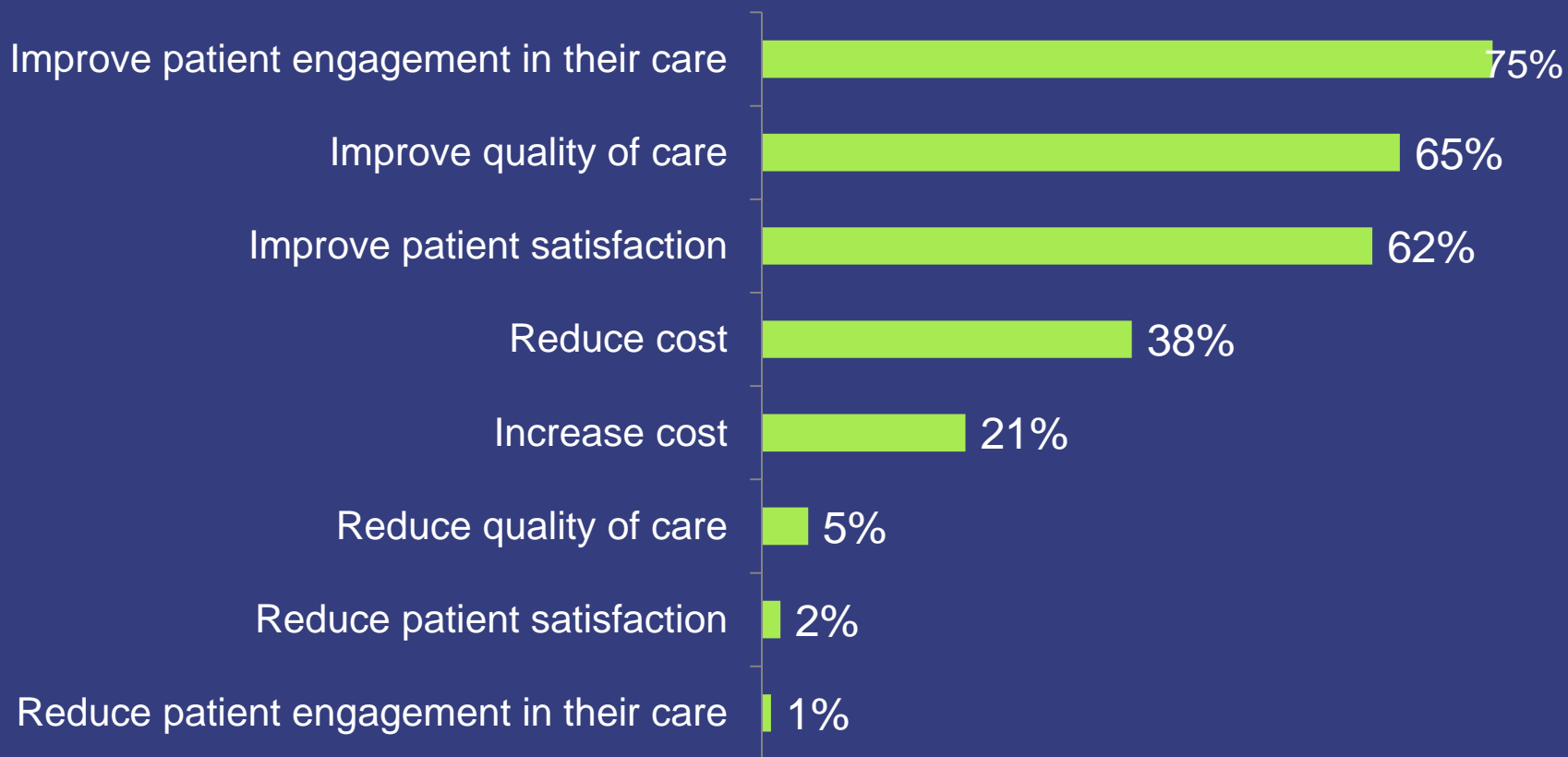
Progress Meeting 2015 Patient Access Requirements

The 2015 Edition Health IT Certification Criteria (2015 Edition) required health IT to demonstrate it can provide access to Common Clinical Data Sets (i.e. DOB, race, ethnicity, vital signs, medications, lab tests/values/results, care team members, immunizations, assessment and plan of treatment, etc.) via an application programming interface (API). MIPS and Meaningful Use requirements for Stage 3 require making such APIs available to patients. Providers in these programs are also subject to new information blocking prohibitions.
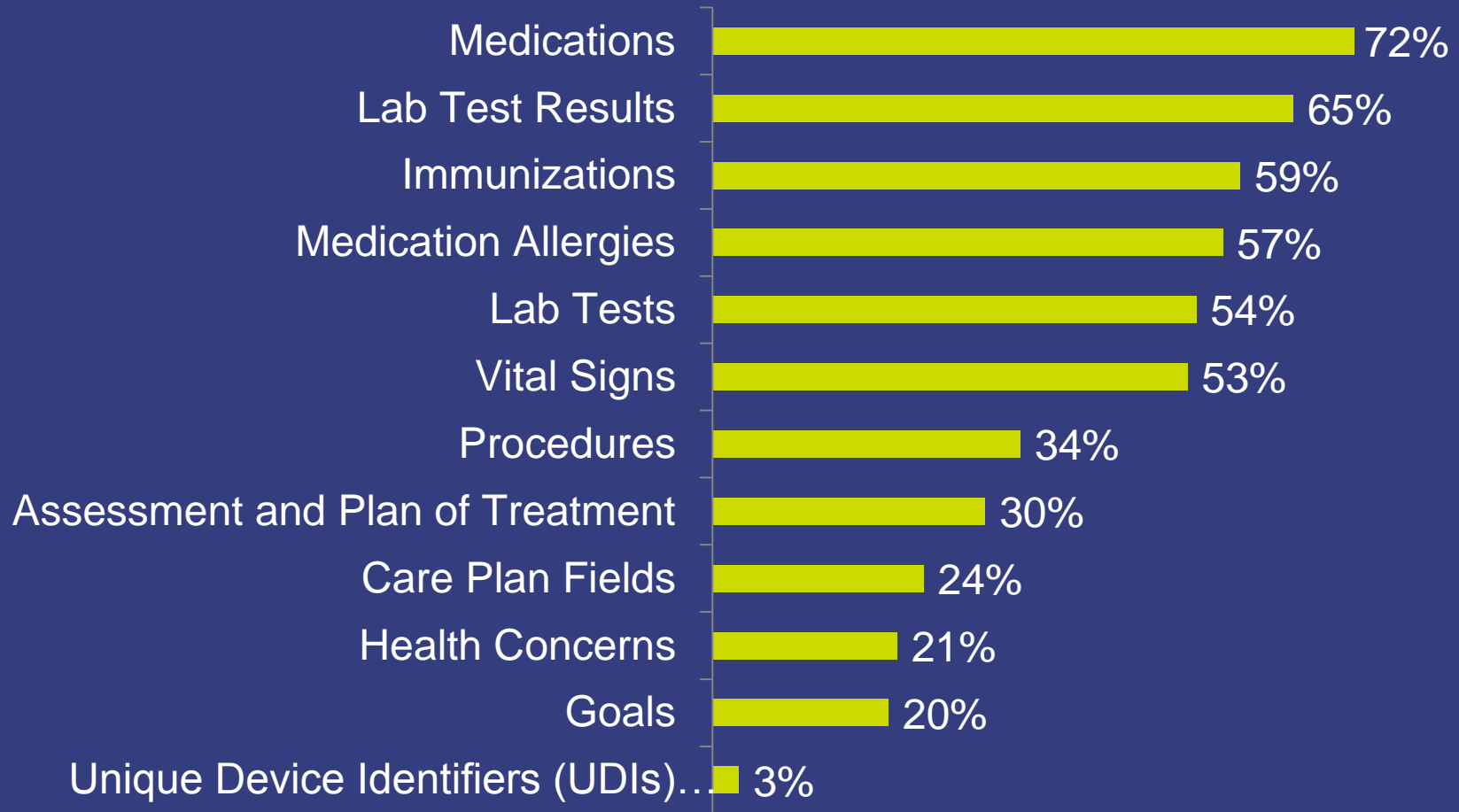
How far along are you in complying with the new patient access requirements?

*In 2016, CMS changed the program to increase flexibility, lower the reporting burden for providers, and focus on the exchange of health information and using technology to support patient.

Progress in Complying With 2015 Patient Access Requirements

Fully implemented certified technology so patients and apps of their choice can… — 9%

In the process of implementing technology — 41%

Evaluating our options/planning phase — 13%

Waiting for guidance from our IT vendors — 12%

Aware of requirements, but have not started — 7%

Unaware there were new requirements, have not started — 3%

Not sure — 15%

Required Clinical Data Set Values Implemented

Category	Percentage
Medications	72%
Lab Test Results	65%
Immunizations	59%
Medication Allergies	57%
Lab Tests	54%
Vital Signs	53%
Procedures	34%
Assessment and Plan of Treatment	30%
Care Plan Fields	24%
Health Concerns	21%
Goals	20%
Unique Device Identifiers (UDIs)…	3%

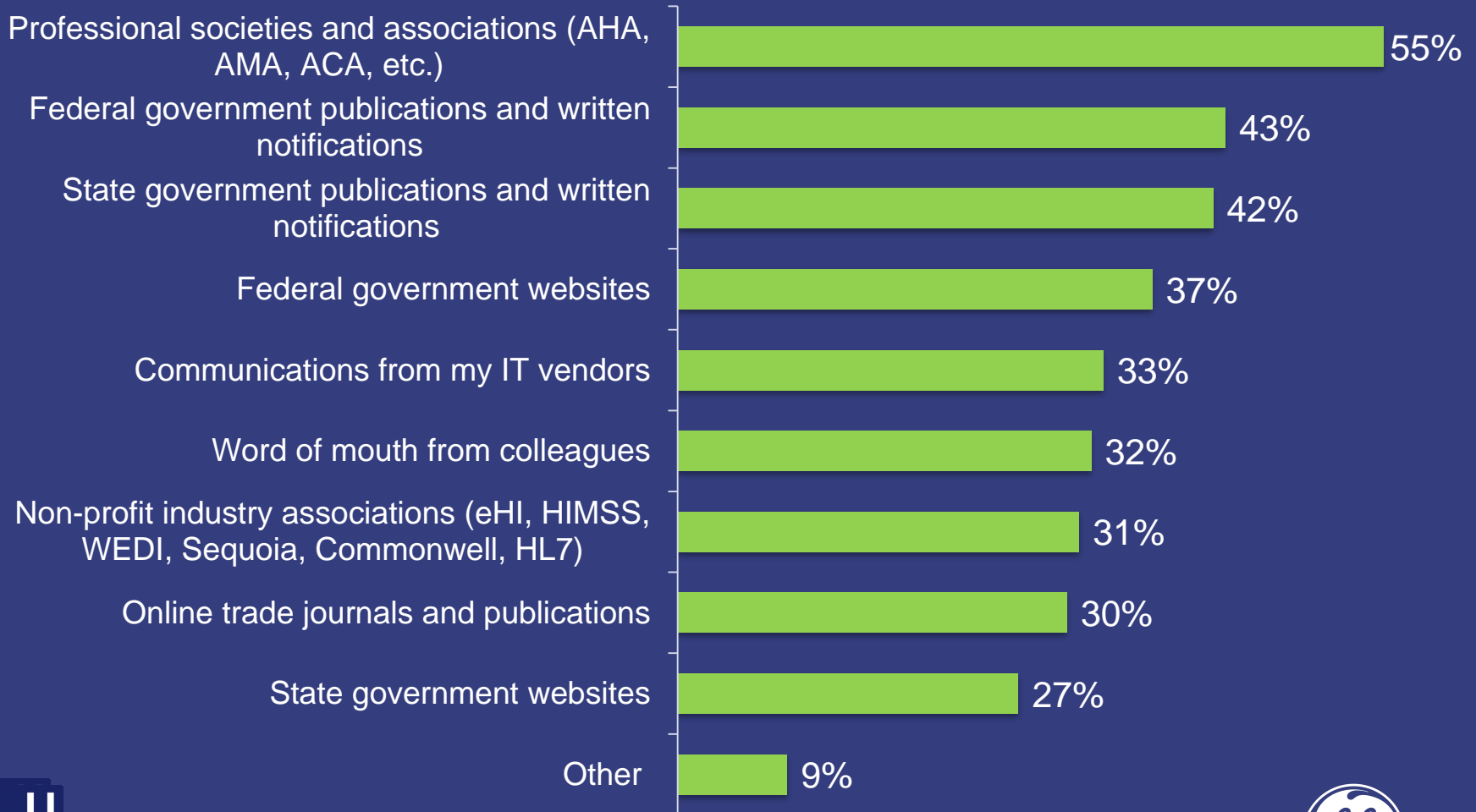# Top Concerns: Security & Confidentiality

How much of a concern are the following?	% respondents w/moderate or major concern
Security concerns from patients	75%
Patient confidentiality	73%
Security concerns about releasing patient health data to 3rd party apps	71%
Increased cost	69%
Patient data might be used by 3rd party apps that are connecting into their EHR	67%
Security concerns from providers	62%
"Information blocking" by vendors	59%
"Information blocking" by other providers	52%
Increased patient requests to accept data from applications that lack clinical efficacy/relevance	45%

Top 3 concerns related to patient security and confidentiality

Who Helps Providers Understand Patient Access Regulatory Requirements?

IT Vendors	Percentage of Respondents Reporting as "Helpful"
EHR vendor	68%
Revenue Cycle/Billing vendor	38%
Imaging IT vendor	30%
Outsourcing vendor	29%
Value Added Reseller	21%

Where Do Providers Go to Learn About New Requirements?

Category	Percentage
Professional societies and associations (AHA, AMA, ACA, etc.)	55%
Federal government publications and written notifications	43%
State government publications and written notifications	42%
Federal government websites	37%
Communications from my IT vendors	33%
Word of mouth from colleagues	32%
Non-profit industry associations (eHI, HIMSS, WEDI, Sequoia, Commonwell, HL7)	31%
Online trade journals and publications	30%
State government websites	27%
Other	9%

Perspectives on Technology

- 63% agree that technology has helped increase healthcare quality since 2008

- 55% agree that great progress has been made in using technology to engage consumers in the management of their health

Perspectives on Value-Based Care: Disconnect with Market Solutions

- 79% agree that strong interoperability capabilities are a key IT requirement for a successful transition to value-based Care

- 68% agree that current interoperability solutions in the market are NOT meeting their needs as they transition to value-based care

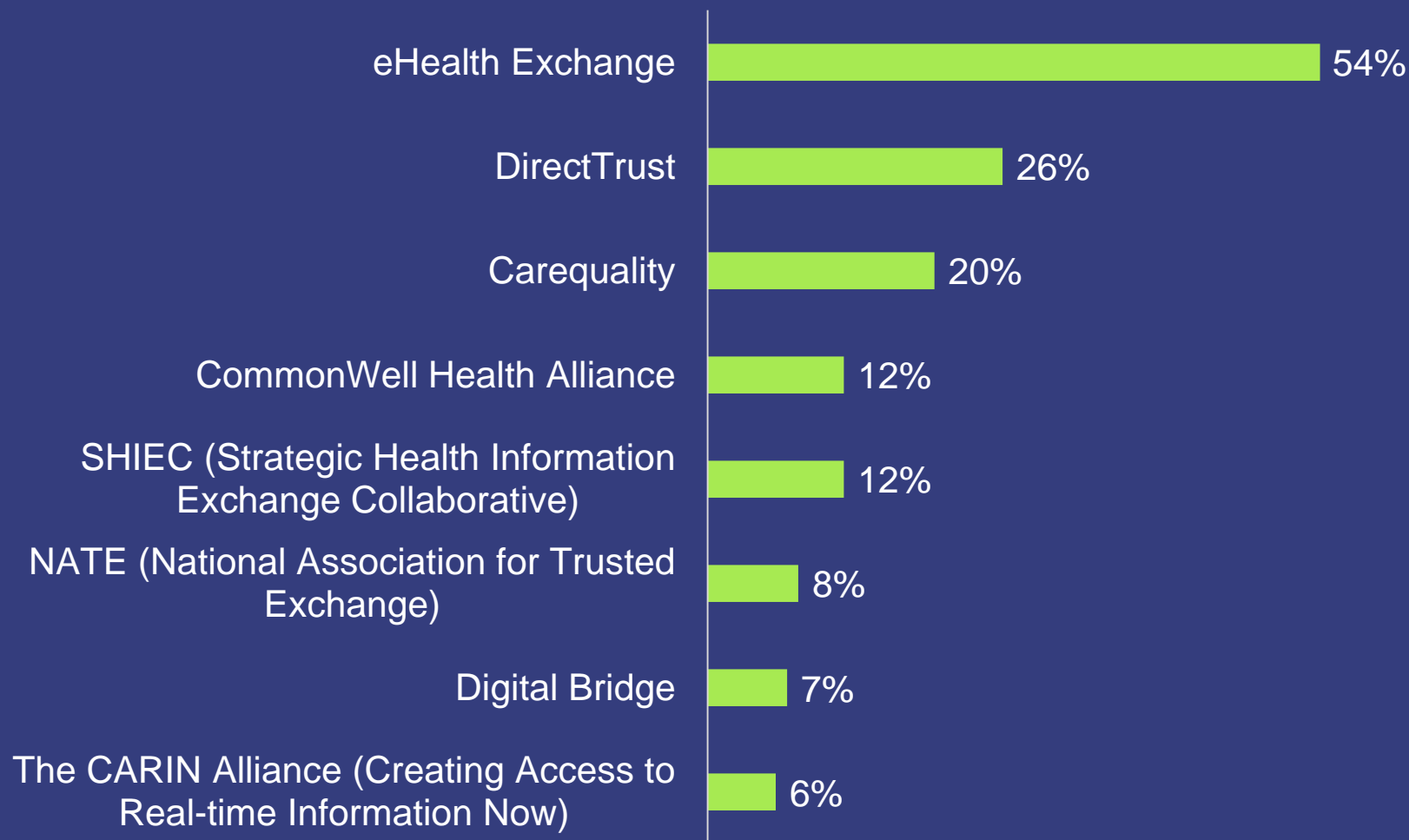- 66% say their current data collection and analysis tools are driving some or significant benefits/value-based care outcomes. Only 14% report that they are not driving outcomes.

Regulatory Perspectives: Disconnect with Value & Regulation

- 47% say that the healthcare industry should self-regulate technology, devices and standards

- 72% report they are very concerned about changing federal regulatory requirements and the costs associated with them

- 71% agree that additional federal incentives need to be created and/or redesigned to enable delivery system transformation

- 29% believe that current federal policies, committees, and regulations are sufficient to help the nation attain meaningful interoperability by 2020

Understanding Requirements

- 35% agree that providers clearly understand which clinical information can be legally shared with other providers and payers

- 57% agree that they understand the current regulatory requirements for Meaningful Use/MIPS

Participation in Frameworks & Alliances

eHealth Exchange — 54%

DirectTrust — 26%

Carequality — 20%

CommonWell Health Alliance — 12%

SHIEC (Strategic Health Information Exchange Collaborative) — 12%

NATE (National Association for Trusted Exchange) — 8%

Digital Bridge — 7%

The CARIN Alliance (Creating Access to Real-time Information Now) — 6%

Impact of Interoperability

Interoperability Would Have Some or Significant Impact on the Following:	
Expedite access to externally sourced patient data, e.g. labs reports, test results, documents from registries, other clinically relevant documents	87%
Close referral loops	82%
Enable patient access to data from their medical records	82%
Identify gaps in care during an encounter	81%
Improve quality of care by closing care gaps with improved workflows	75%
Enable patients to provide data (i.e. Fitbit, remote monitoring, etc.)	64%

Prioritizing Connectivity Areas (1= Least Important; 4= Most Important)

Connectivity Areas	1	2	3	4	Weighted Score
Reporting: Exchange data for regulatory reporting/industry wide data for research purposes	29%	26%	19%	25%	2.59
Payer-Provider interoperability: Close care gaps via access to missing information from payer	24%	31%	24%	21%	2.57
Interoperability within the practice/provider organization: Access patient data within the provider organization via several interfaces (labs, patient portal, 3rd party modules, etc.) to build complete patient record, but still practice	21%	25%	23%	31%	2.36
Interoperability across providers: Use interoperability to gather data across different provider organizations to support a holistic view of the patient and accountable care collaboration (Population Health Management Interoperability)	14%	19%	37%	30%	2.18

Interoperability Budgets Increasing Over Next 2-3 Years

	Percentage of Respondents
Increase	58%
No change	18%
Decrease	8%

6 Final Findings

- **Patient engagement appears to be increasing**
  More patients are accessing and managing the "sharing" of their own information. Not clear *if* or *how* this impacts care.

- **Disconnect with regulations, solutions & implementation**
  Interoperability continues to grow in importance but regulations are sometimes unclear or difficult to implement. Market is meeting the regulatory needs, which are not necessarily the business needs.

- **Value should drive change not regulations**
  There is some perception that regulations are driving interoperability. Interoperability changes should be driven by business value.

6 Final Findings (continued)

- **<u>Concerns continue on security & sharing</u>**
  Patient security, privacy and confidentiality remain top concerns. The perception of information blocking remains with about half the group.

- **<u>Prof. societies & industry groups play lead role</u>**
  Serving as educators and collective voice where providers can go for information. Need to ensure regulations don't counteract interoperability requirements for business.

- **<u>Industry need to refine & clearly state priorities</u>**
  eHI Roadmap Refresh will help address this need for the industry.

Roadmap Refresh
February 7 & 8, 2018

eHI originally developed the 2020 Roadmap in 2014

- The world has changed, the landscape has changed
- Roadmap deliverables—what is relevant now, what is not
- Refine vision / strategies / priorities
- Gain multi-stakeholder consensus on all priorities
- Create momentum for eHI to lead private sector efforts to bridge gaps and achieve outcomes

Overarching Roadmap Vision

Transform healthcare delivery with patient-centric care

- Harmonize new technology & care models
- Improve population health
- Increase patient-consumer experiences
- Lower costs

Provider Perspectives on Patient Data Moving Forward on Interoperability

Chris Muir, Director, Health IT Infrastructure and Innovation

October 19, 2017

ONC PROJECTED OUTCOMES

	PATIENT	**PROVIDER**	**COMPETITIVE MARKETPLACE**
Interoperability	Movable health records to shop for and coordinate care	Ability to efficiently to send, receive, and analyze data	Improved data flow standards Accessible API's
Usability	Lower cost of care through greater provider efficiency More eye contact with providers	Burden reduction: • Less wasted time • Less hassle	Ability to support new business models and software applications

INTEROPERABILITY TARGETS

Technical

Trust

Financial

Workforce

MARKET FORCES

Thank you!

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Questions & Answers

eHealth Initiative Foundation thanks GE Healthcare for their support of this webinar and other educational programs.