



The Value of HIT

Latest insights from HIMSS
and HIMSS Analytics

May 2014

HIMSS Analytics[®]

Learning Objectives

Describe the HIMSS HIT Value-Suite model (STEPS)

Identify at least three positive benefits of HIT in a healthcare organization

Identify at least two HIT industry opportunities

.

The Value of HIT Is Being Questioned

BALTIMORE
BUSINESS JOURNAL

Electronic health records advance, but some question their value



Some Doctors Say EHR Systems Not Improving Quality, Survey Finds

THE WALL STREET JOURNAL.

A Major Glitch for Digitized Health-Care Records

Savings promised by the government and vendors of information technology are little more than hype.

The New York Times

A Digital Shift on Health Data Swells Profits in an Industry

25th
annual

HIMSS

LEADERSHIP SURVEY

 **LACK OF FINANCIAL RESOURCES** are a
KEY BARRIER to successfully implementing IT



despite the fact that about
two-thirds reported that their
BUDGET INCREASED
in the past year



MISSOURI

2014 HIT

SHOW-ME STATE

LP-2740

Made in USA

The HIMSS Health IT Value Suite

www.himss.org/ResourceLibrary/ValueSuite.aspx#/steps-app



Value STEPS™

Health IT creates **five kinds of value** that benefits patients, healthcare providers and communities.

S Satisfaction

T Treatment/Clinical

E Electronic information/data

P Prevention & Patient Education

S Savings

Efficiency

Financial/business

Operational

Each of the **Value STEPS™** contains **categories and subcategories** to explore...



Operational

Each of the **Value STEPS™** contains categories and subcategories to explore...

Reduction in overtime

Decrease nursing overtime

...which leads you to **specific articles** on the topic you need.

The screenshot shows a HIMSS article titled "Population Health Benefits" by Neal Paschowski, dated August 9, 2013, by Jeremy L. Bradley, MD, KY, USA. The article text describes how Jeremy L. Bradley, MD, implemented a patient centered medical home (PCMH) model and was able to take full advantage using health IT, which offered "unprecedented opportunities to practice the PCMH philosophy." Bradley's practice is the first in Kentucky to be recognized as a Excellence Patient Centered Medical Home, it has also earned PCMH recognition from the NQA. The article also mentions that since implementing, average systolic blood pressure decreased 2.7 percent, average diastolic pressure fell 13.3 percent, average LDL and HDL values fell by 27.8 and 36.3 percent respectively. A quote from Jeremy L. Bradley, MD, states: "The capabilities of today's EHR make it easier than ever to manage chronic conditions consistently and accurately throughout a clinic's patient base." There is a "Tweet this" button below the quote. On the right side of the article, there is a sidebar with a "More" section containing "Value Suite", "IM/Remote", "Quality of Care", and "Reduction in Overtime". Below that is a "RELATED ARTICLES IN TREATMENT" section with five entries, each with a "Descriptive title of article" and "Organization name".



Filtering the Value STEPS™

Use the sidebar to **filter results** by specific criteria or to view **featured organizations** and **articles**.



FILTER ARTICLES

TYPE

- Academic medical center
- Accountable care hospital

Filter articles by different classifications such as organization type, awards, federal designations, location, and more.



FEATURED ORGANIZATIONS

Featured organization name 1
Location

Featured organizations are highlighted because of their many examples of proven value through the use of health IT.



FEATURED ORGANIZATIONS

Featured organization name 1
Location

Featured articles are selected to highlight recent or extremely significant examples of the Value STEPS™.

Value Overview

- As of early January 2014 — **556** providers

STEPS Categories	# of Providers	Percentage
S atisfaction	273	49%
T reatment/Clinical	495	89%
E lectronic Information/Data	290	52%
P revention/Patient Education	154	28%
S avings	371	67%

SATISFACTION

- As of early January 2014 — **556** providers

Satisfaction	# of 273 Providers	Percentage
Patient Satisfaction <ul style="list-style-type: none">• Improved Communication with staff• Overall increased provider satisfaction• Improved quality of life• Improved communication with other providers	109	40%
Provider Satisfaction <ul style="list-style-type: none">• Increased in overall patient satisfaction and/or survey score• Increased use of patient portal	159	58%
Staff Satisfaction <ul style="list-style-type: none">• Increased staff morale/job satisfaction• Overall improved internal communication	78	29%
Other Satisfaction <ul style="list-style-type: none">• Other Satisfaction Benefits	50	18%

SATISFACTION



SATISFACTION



Unexpected Benefits

Davies submission | 11/06/2013 | Mount Sinai Medical Center



Mount Sinai Medical Center saw an improvement in its patient satisfaction with doctors and nurses level, which improved from 50 to 80 percent. Dependence on patients' memories and errors arising from retyping information were reduced, just two of the factors contributing to this improvement.

"The seamless integration of care delivery has been one of the greatest clinical values of the new system."



Aditi Vakil

TREATMENT/CLINICAL

- As of early January 2014 — **556** providers

Satisfaction	# of 495 Providers	Percentage
Efficiencies <ul style="list-style-type: none"> • Increased efficiency in scheduling patients • Other efficiencies • Increased use of e-prescribing (Orders and refills) • Improved accessibility of lab/x-ray reports • Overall increased efficiencies • Decreased redundancy in testing (labs/x-ray) • Real time/remote access to health records • Increased time for patient interaction 	381	77%
Quality of Care	296	60%
Safety	282	57%
Other Treatment/Clinical	35	7%

TREATMENT/CLINICAL (cont'd)

- As of early January 2014 — **556** providers

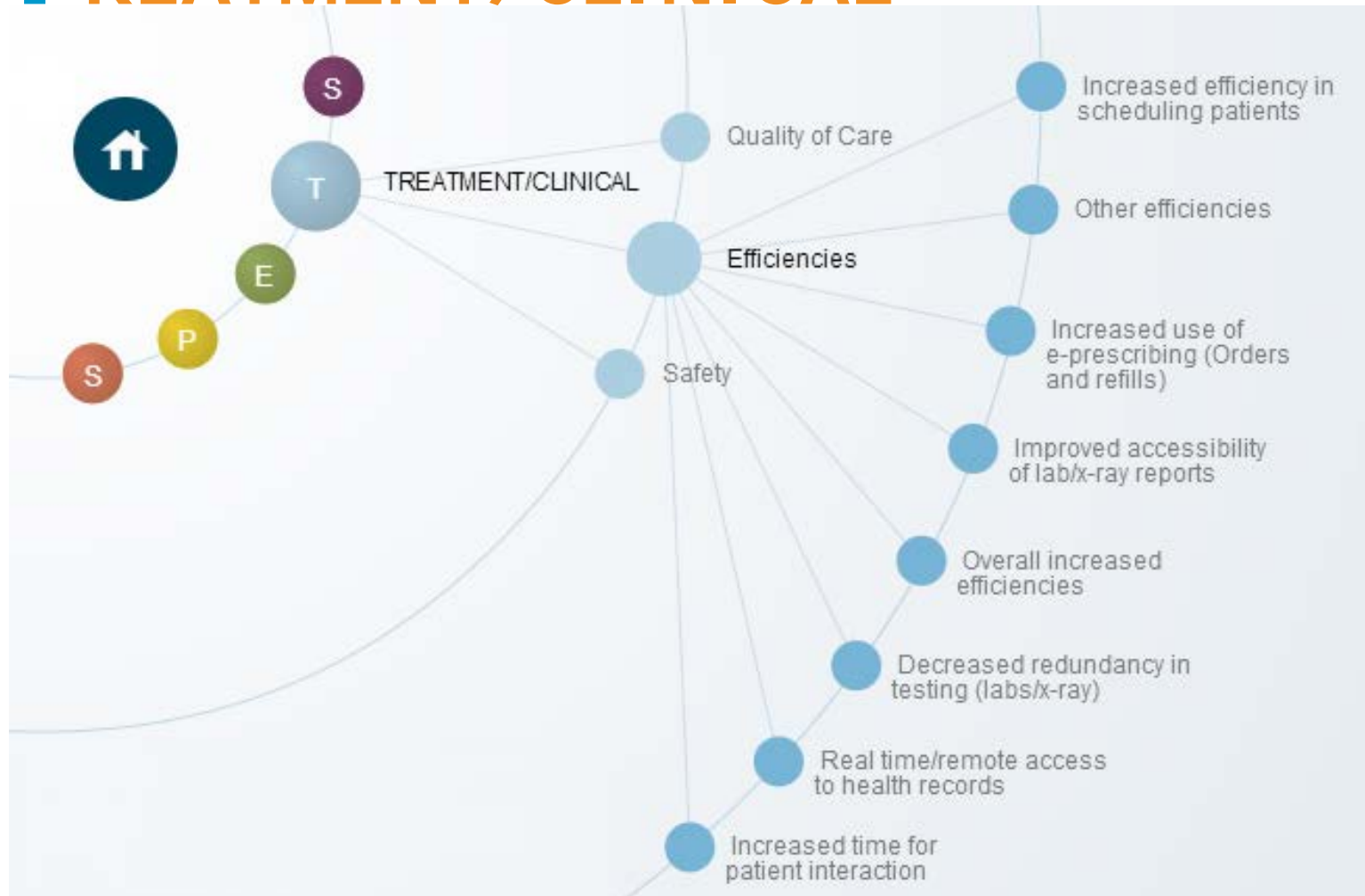
Satisfaction	# of 495 Providers	Percentage
Efficiencies	381	77%
Quality of Care <ul style="list-style-type: none"> • Reduction in hospital acquired infections • Other quality of care benefits • Decreased response time to patient requests • Overall improved quality of care • Reduction in readmissions • Increased information sharing between providers • Improved continuity of care • Reduction in hospital acquired pneumonia • Improved management of diabetes • Other Treatment/Clinical benefits 	296	60%
Safety	282	57%
Other Treatment/Clinical	35	7%

TREATMENT/CLINICAL (cont'd)

- As of early January 2014 — **556** providers

Satisfaction	# of 495 Providers	Percentage
Efficiencies	381	77%
Quality of Care	296	60%
Safety <ul style="list-style-type: none">• Improved clinical documentation• Improved use of clinical alerts• Reduction in medical errors• Other safety benefits• Overall improved patient safety• Reduction in medication related errors	282	57%
Other Treatment/Clinical	35	7%

TREATMENT/CLINICAL



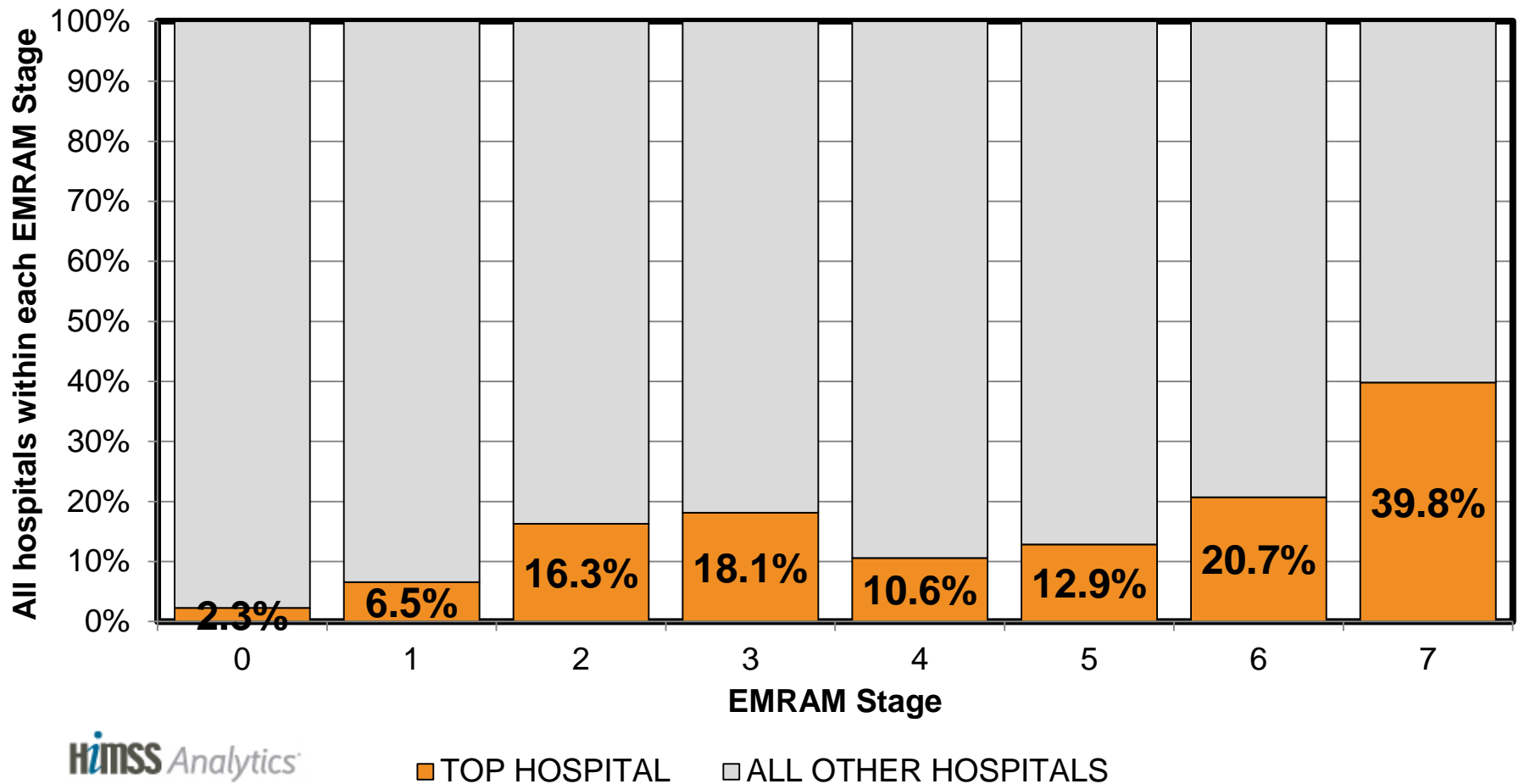
TREATMENT/CLINICAL

The Joint Commission Top Performing Hospitals

- There is a positive association between EMR capabilities (as measured by EMRAM) and The Joint Commission's Top Performing Hospital measures
- Advanced EMRAM Stages have a higher proportion of THC Top Performing Hospitals than EMRAM Stages with lower EMR capabilities

TREATMENT/CLINICAL

Representation of TJC Top Performing Hospitals within each EMRAM Stage (2013)



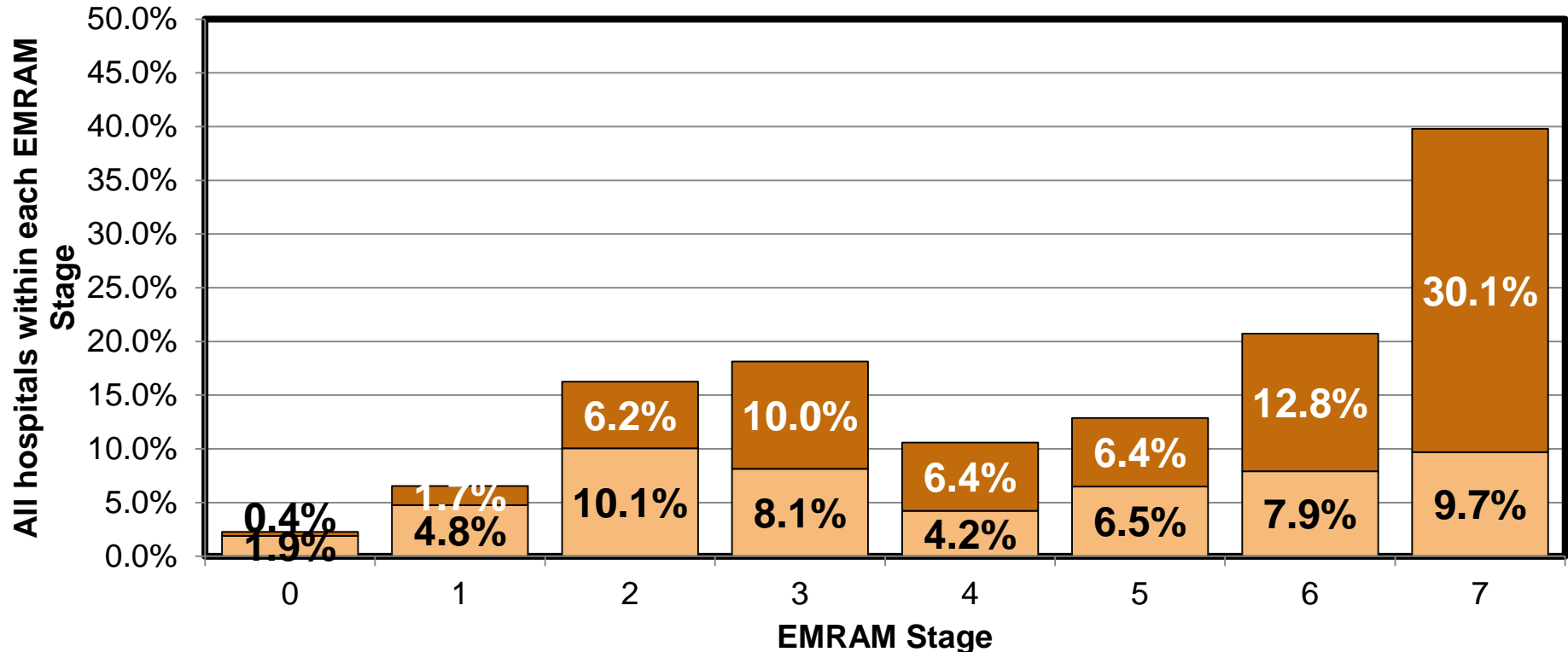
TREATMENT/CLINICAL

The Joint Commission Top Performing Hospitals

- The number of quality measures a hospital excels in is related to the hospital's EMR capabilities

TREATMENT/CLINICAL

Representation of TJC Top Performing Hospitals BY Number of Quality Metrics Excelling In, within each EMRAM Stage (2013)

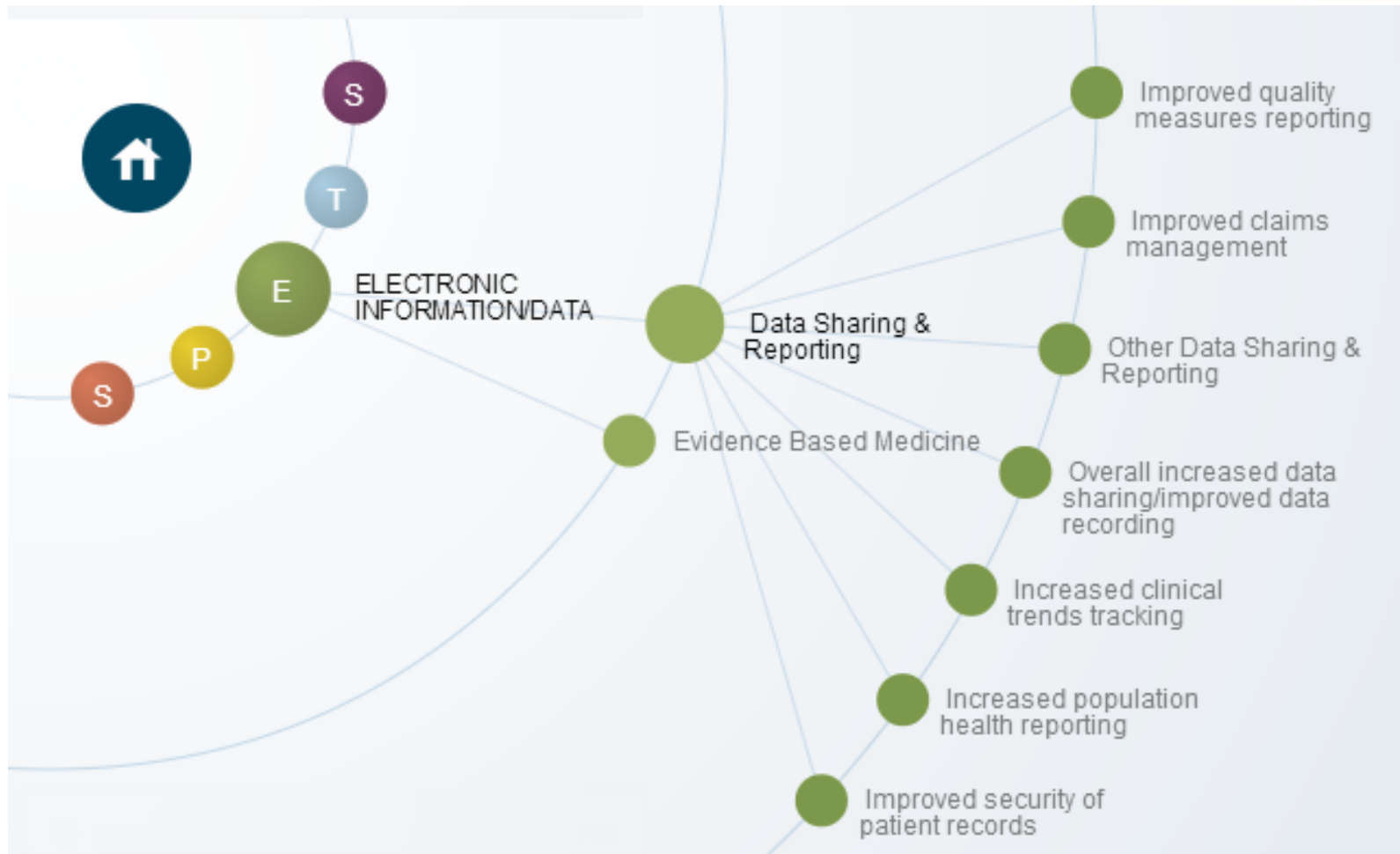


ELECTRONIC INFORMATION/DATA

- As of early January 2014 — **556** providers

Electronic Information/Data	# of 290 Providers	Percentage
Data Sharing and Reporting <ul style="list-style-type: none">• Improved quality measures reporting• Improved claims management• Other Data Sharing & Reporting• Overall increased data sharing/improved data recording• Increased clinical trends tracking• Increased population health reporting• Improved security of patient records.	253	87%
Evidence Based Medicine <ul style="list-style-type: none">• Improved access to data for research• Increased # of patients tracked/included in data warehouse• Improvement in medical education	79	27%


ELECTRONIC INFORMATION/DATA




OPPORTUNITY 1: Physician Related Applications can be a Bottleneck to EMR Adoption

Top five applications acquired/installed each year in U.S. hospitals

Application	2008	2009	2010	2011	2012	2013	AVG RANK
Computerized Practitioner Order Entry (CPOE)	2	1	1	1	1	2	1.2
Physician Documentation	3	3	2	2	2	1	2.0
Electronic Medication Administration Record (EMAR)	1	2	3	3	3	3	2.8
Nursing Documentation	4	4	4	4	4	5	4.2
Order Entry (Includes Order Communications)	6	6	5	5	5	7	5.6

 Higher market demand

 Lower market demand

PREVENTION & PATIENT EDUCATION

- As of early January 2014 — **556** providers

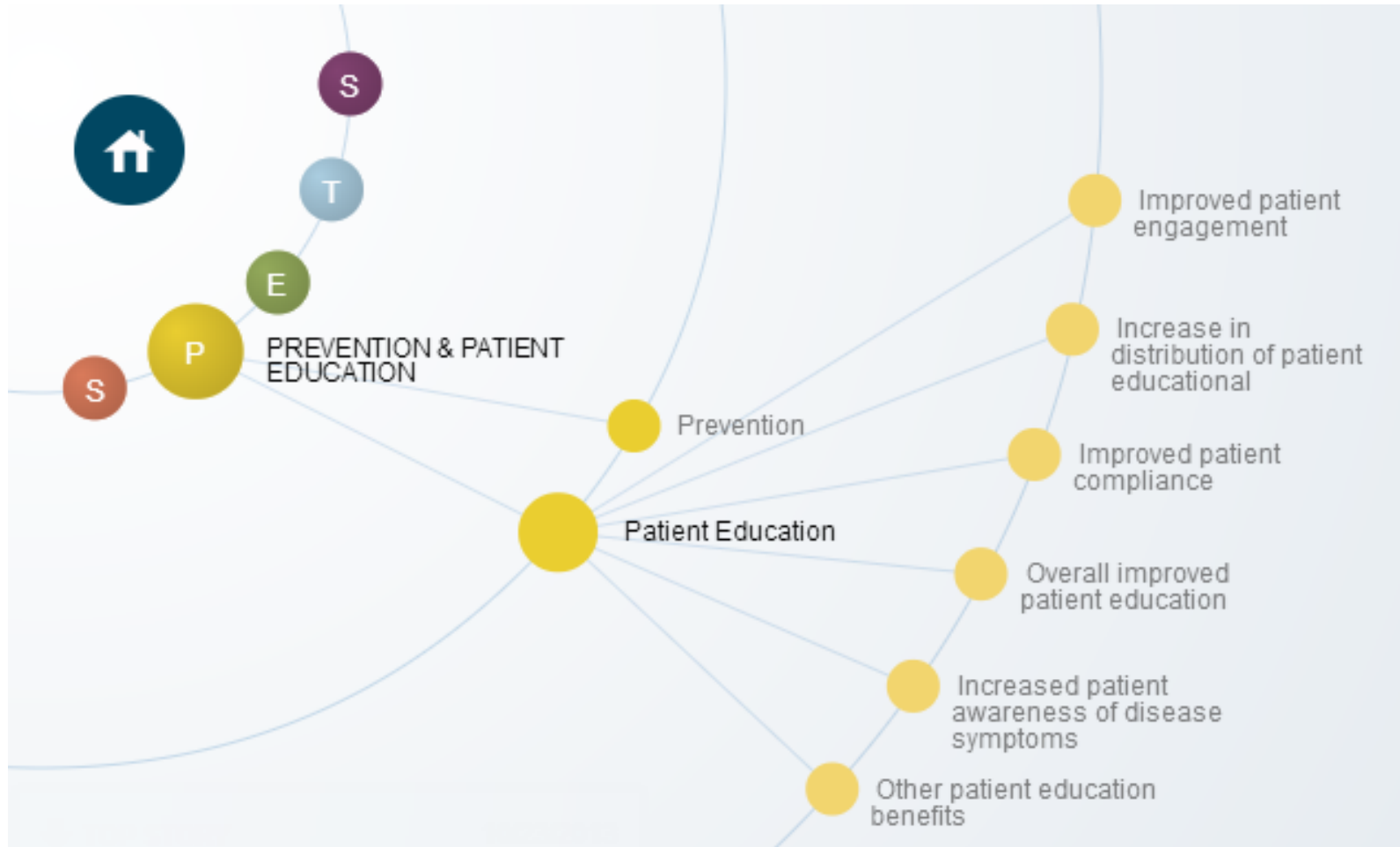
Prevention/Patient Education	# of 154 Providers	Percentage
Patient Education <ul style="list-style-type: none">• Improvement in disease surveillance• Overall improvements in prevention• Increased immunizations• Increased cancer screenings• Increased disease tracking• Longitudinal patient tracking• Longitudinal patient analysis• Other Prevention benefits	114	74%
Prevention	78	51%

PREVENTION & PATIENT EDUCATION

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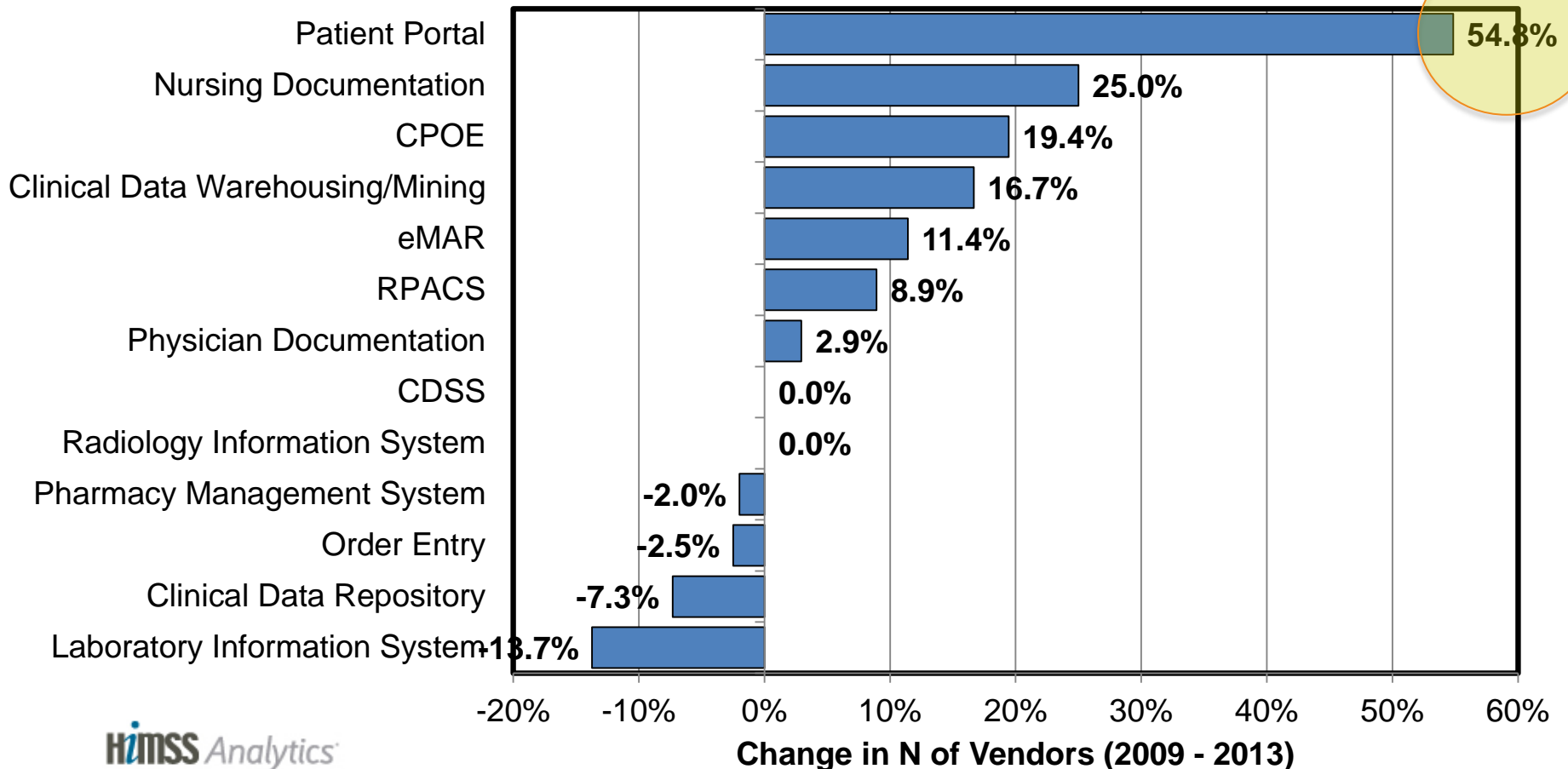
Prevention/Patient Education	# of 154 Providers	Percentage
Patient Education	114	74%
Prevention <ul style="list-style-type: none">• Improved patient engagement• Increase in distribution of patient educational• Improved patient compliance• Overall improved patient education• Increased patient awareness of disease symptoms• Other Patient Education benefits	78	51%

PREVENTION & PATIENT EDUCATION



OPPORTUNITY 2: Patient Portals as a means to Engage Patients

Change in the number of EMR related HIT vendors servicing at least one U.S. hospital



SAVINGS

- As of early January 2014 — **556** providers

Savings	# of 371 Providers	Percentage
Efficiency Savings <ul style="list-style-type: none">• Reduction in transcription costs• Improved workflow/practice efficiency• Reduced patient wait times• Reduction in emergency department admissions• Overall increased efficiency• Other efficiency savings	249	67%
Financial/Business	194	52%
Operational Savings	183	49%

SAVINGS

- As of early January 2014 — **556** providers

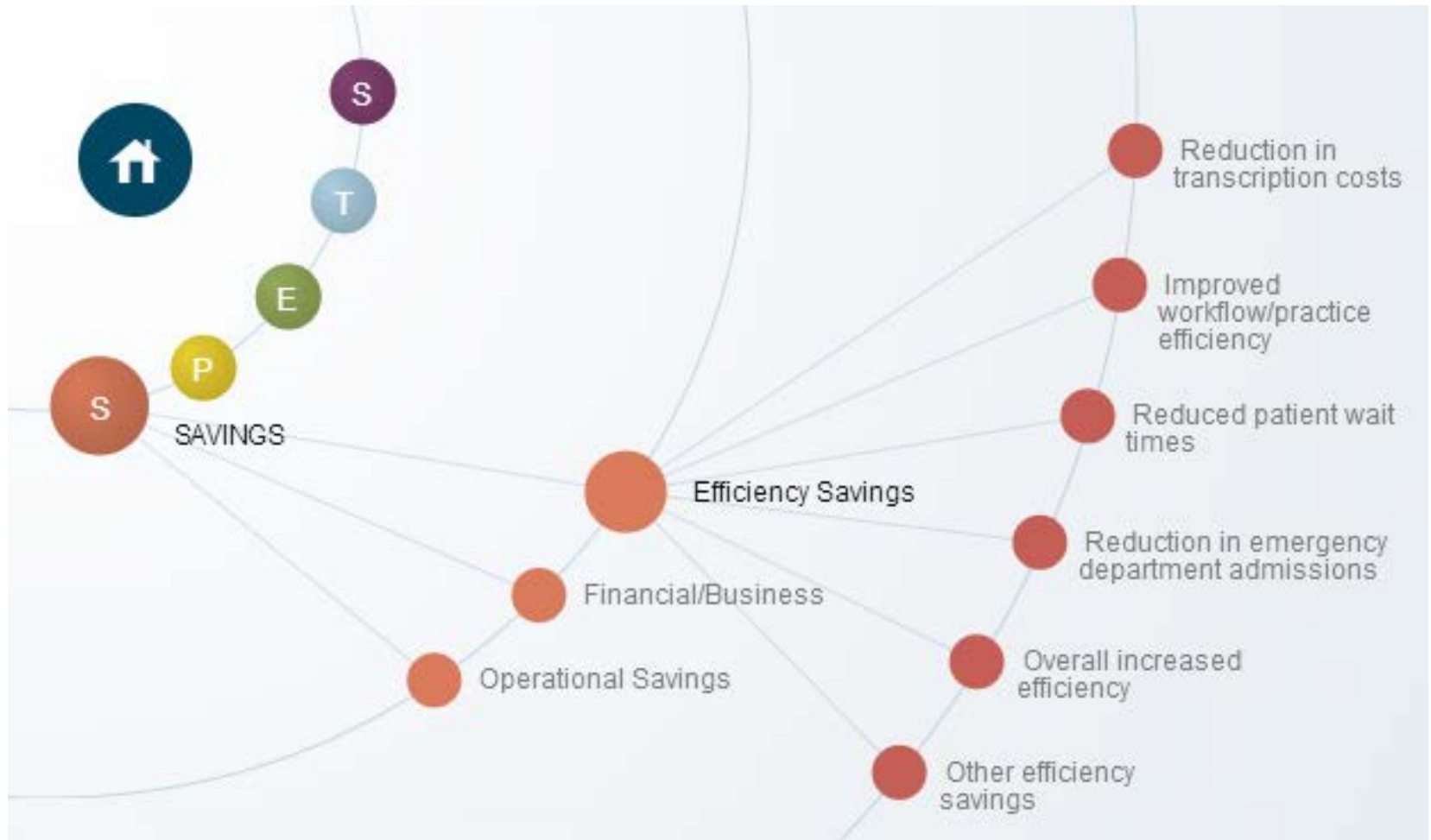
Savings	# of 371 Providers	Percentage
Efficiency Savings	249	67%
Financial/Business <ul style="list-style-type: none">• Increased coding accuracy• Increased patient revenue• Reduction in days in accounts receivable• Other Financial / Business benefits• Reduction in length of inpatient stay• Overall improved financial results	194	52%
Operational Savings	183	49%

SAVINGS

- As of early January 2014 — **556** providers

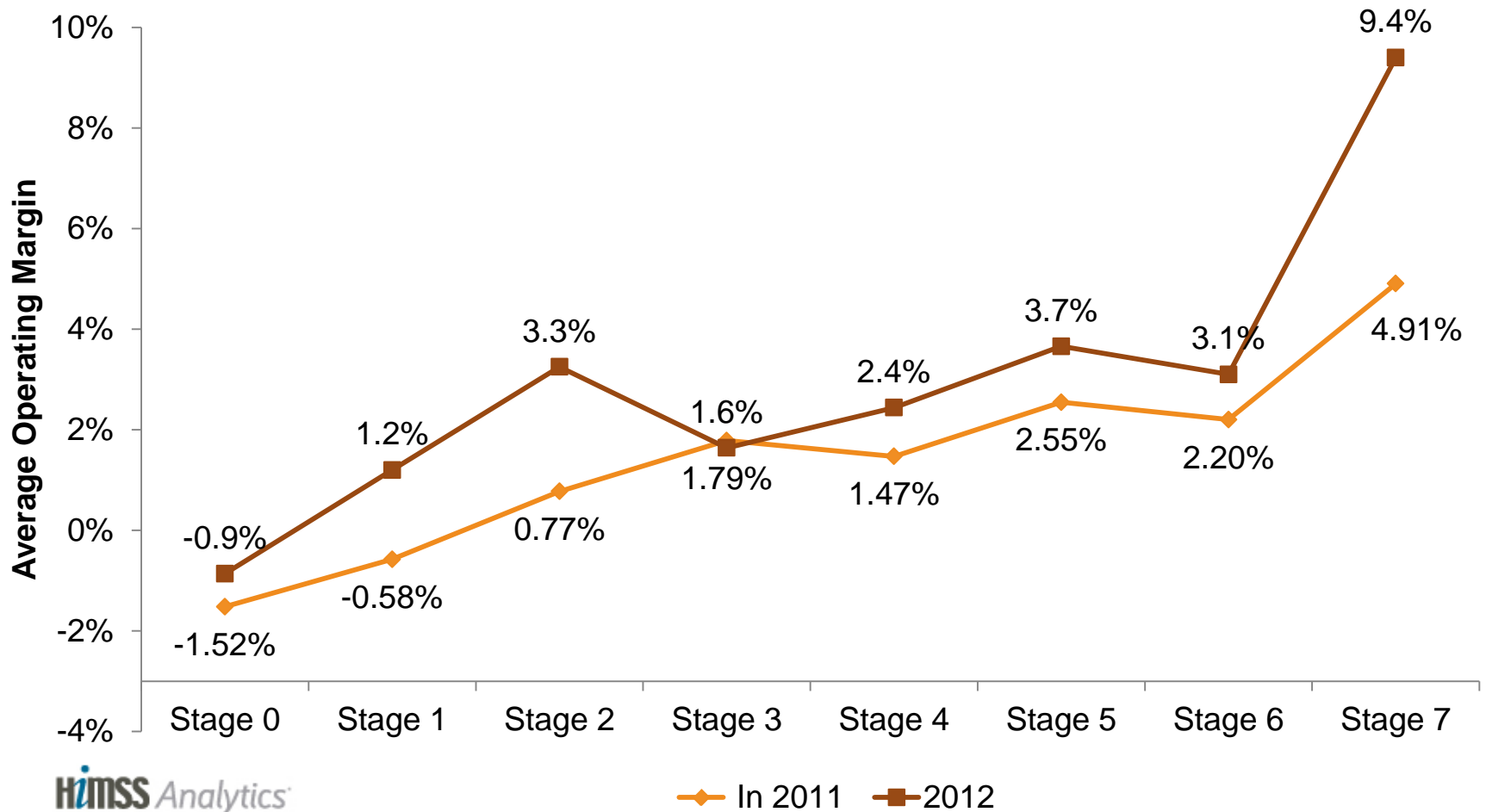
Savings	# of 371 Providers	Percentage
Efficiency Savings	249	67%
Financial/Business	194	52%
Operational Savings <ul style="list-style-type: none">• Improved use of space• Other operations savings• Improve inventory control• Reduction in FTEs or employee hours• Improved business recovery planning (e.g. disaster preparedness)• Reduction in overtime	183	49%

SAVINGS



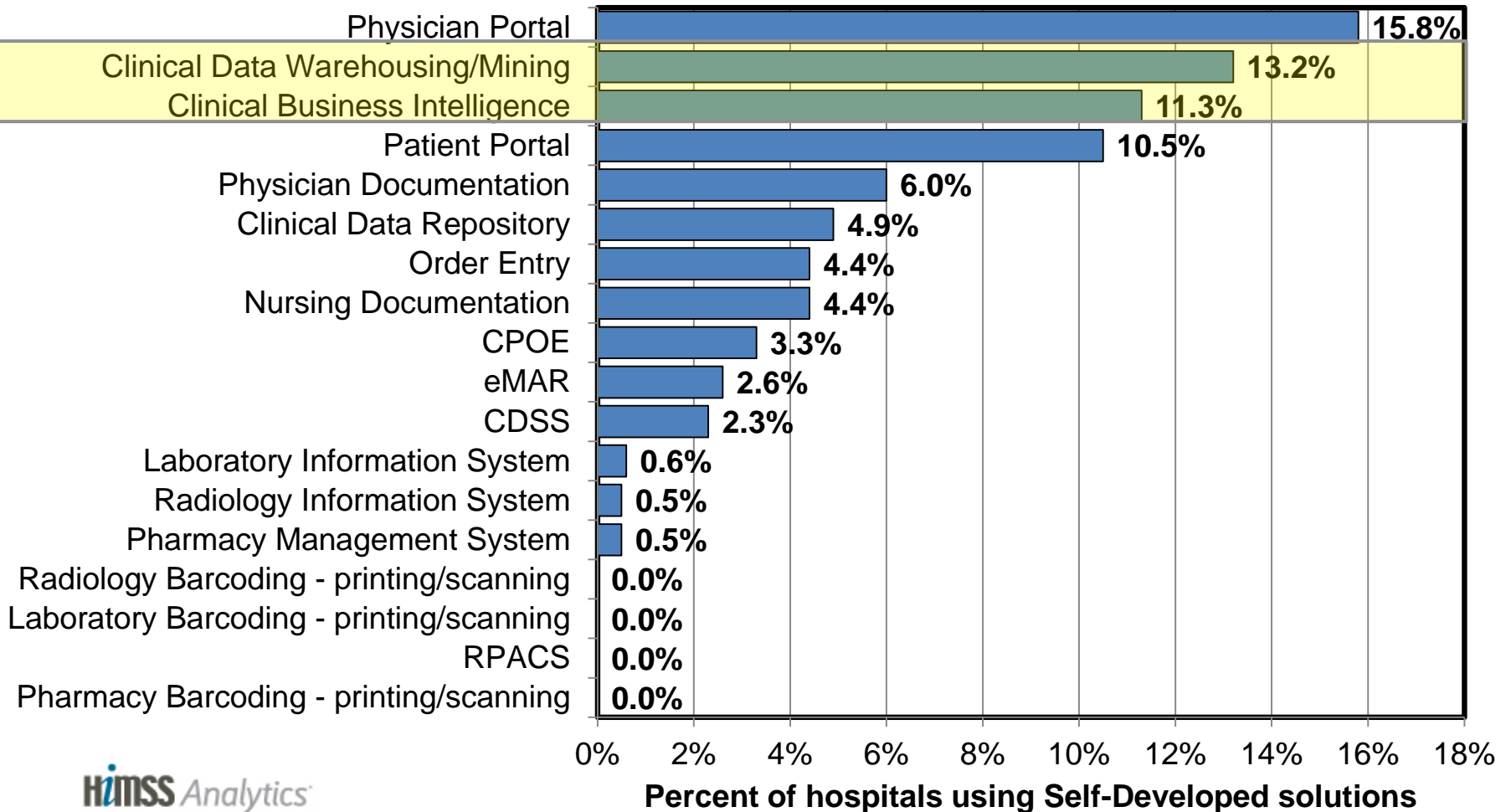
SAVINGS

Financial Performance (Profitability)



OPPORTUNITY 3: Clinical & Business Intelligence Tools

Percent of hospitals using Self-Developed solutions



How to use the HIMSS Health IT Value Suite

- Visit the website: www.himss.org/ValueSuite
- Review the continuing website development
 - HIMSS Health IT Value STEPS™ description
 - Examples and tools for providers
- Share provider and patient stories
 - “Share your story” Link
- Primary contacts
 - Pat Wise, Vice President, HIS, for HIMSS at pwise@himss.org (*to request information from the Value Suite*)
 - Rod Piechowski, Sr. Director, HIS at rpiechowski@himss.org

Thank You

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The logo for HIMSS Analytics, featuring the word "HIMSS" in a bold, blue, sans-serif font, followed by "Analytics" in a smaller, grey, sans-serif font. A small registered trademark symbol (®) is located at the end of the word "Analytics".