



Davies Award Executive Summaries:
Hudson River Healthcare, Inc. 2011 Davies Community Health Organization Winner

[Hudson River HealthCare, Inc. \(HRHCare\)](#) is a New York State licensed, federally qualified health center. HRHCare has grown to 16 primary care sites throughout NY State's Hudson Valley and Long Island, and has a staff of 500 providing comprehensive primary, preventive, oral and behavioral health care and enabling services to 64,000 racially diverse, predominantly low income patients through over 275,000 visits annually.

HRHCare used eClinicalWorks Version 9, which, with electronic prescribing and the *eClinicalWorks* Patient Portal, received 2011-2012 ONC-ATCB Complete EHR certification.

Clinical Quality and Patient Safety:

HRHCare determined several areas of clinical quality improvement where they sought to improve care through their implementation.

- Timeliness (Time to 3rd Appointment): HRHCare improved the average time to a patients third appointment from 12 days in 2007 to 2.2 days in 2011.
- Effectiveness (A1C Testing): HRHCare increased the number of patients receiving A1C tests from 77% in 2007 to 85% in 2011.
- Patient Centered (100% Patient Recommendations): HRHCare received a 100% CAPHS score in 2010.
- Prevention: Mammography: HRHCare rates have risen from 5% of at-risk patients in 2007 to 31% in 2011.
- Prevention: Pap Smears: HRHCare rates have risen from 4% in 2007 of patients to 48% in 2011
- Chronic Disease Care: HbA1c Screening Rates: HRHCare rates have risen from 52% of patients in 2007 to 86% of patients in 2011.

Through use of the EHR, HRHCare was able to improve quality of care and better patient outcomes. The EHR enables patients to be more engaged in their health through improved communication with the provider team. HRHCare is able to educate their patients based on their health literacy, language choice and learning style including showing them on the computer screen trends in their A1C levels, blood pressure etc. The EHR triggers alerts to maintain consistent testing, education and follow up with the patient and provider to improve care and outcomes. In addition, by demonstrating improved outcomes, HRHCare is able to apply for funding due to demonstrating improved outcomes through use of the EHR. The improved outcomes and quality of care promote and support the CMS Triple Aim: better health for patients, better health for communities and lower healthcare costs.

Financial Goals and Performance:

Initially, provider productivity declined but the impact to financial performance was quickly offset by creatively leveraging the enhanced reporting tools to improve collections and payor mix. Over time, productivity improved with an increase in visit growth of nearly 28% from 2008 through 2010. Advances in reporting allowed HRHCare to mine managed care rosters and state Medicaid rolls for insurance information on patients previously thought to be uninsured, resulting in increased revenue per visit.

Other financial benefits include the redeployment of medical record staff from their role of filing and maintaining records to assisting with scanning documents, the immediate processing of claims with minimal data entry, improvements in accounts receivable and the achievement of NCQA Level 3 Patient Centered Medical Home, yielding \$1,060,000 in annual revenues and bonuses through improved coding.

The total cost of investment in the EHR consisted of contractual dollars, hardware investment, network connectivity, training, building a reporting environment, and lost productivity equals roughly \$1,560,000. The financial benefits realized included obtaining new grants for care coordination and HIE of \$5.9 million and an additional grant for implementation of the EHR of \$1.2 million. On a one year calculated basis since some costs are ongoing (contractual dollars associated with licenses) the ROI yield is approximately 5.23 to 1.