



Rural Hospital Journey to an EMR

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Rural Hospital Journey to an EMR

- ARRA – What's it all about?
- How does Rural Hospital fit?
- Rural Hospital Current Environment
- Next Steps

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Definitions

- **ARRA - American Recovery & Reinvestment Act**
- **HIT - Healthcare Information Technology Workgroup** (Federal Level)
- **ONC – Office of National Coordinator** (For HIT at Federal level)
- **EHR – Electronic Health Record**
- **EMR – Electronic Medical Record**
- **HCO – Health Care Organization**
- **CCD – Continuity of Care Document**
- **CDSS – Clinical Decision Support System**
- **R-PACS – Radiology Picture Archiving Communications System**
- **CPOE – Computerized Practitioner Order Entry**
- **HIS – Healthcare Information Systems**
- **MAGIC – Meditech Proprietary Operating System**
- **FOCUS – Meditech Proprietary Operating System for Release 6.0**
- **OS – Operating System**

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ARRA HIT Summary Meaningful Use Workgroup

Federal Government

Secretary of Health & Human Services

Kathy Sebelius

National Coordinator for Health Information Technology

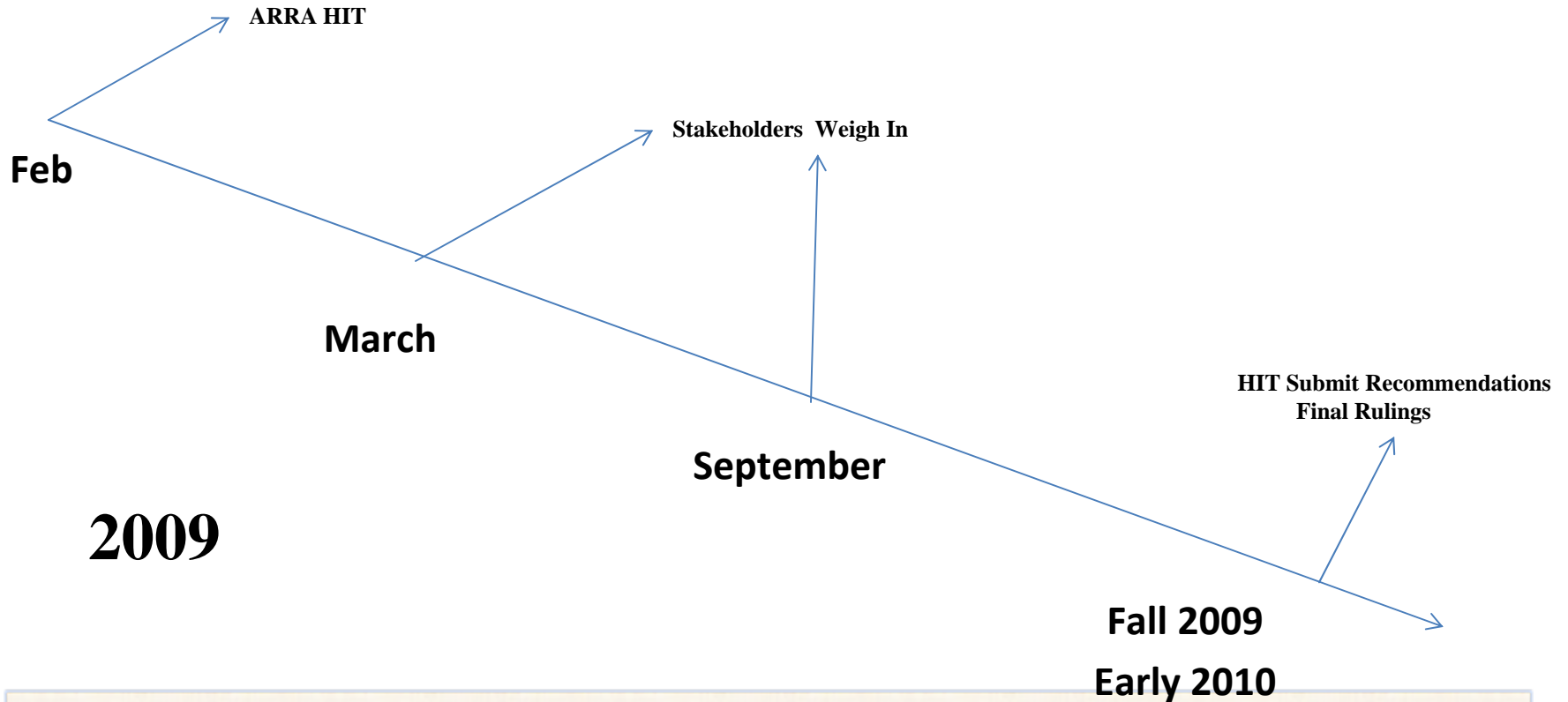
Dr. David Blumenthal

National HIT Workgroup

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ARRA Meaningful Use

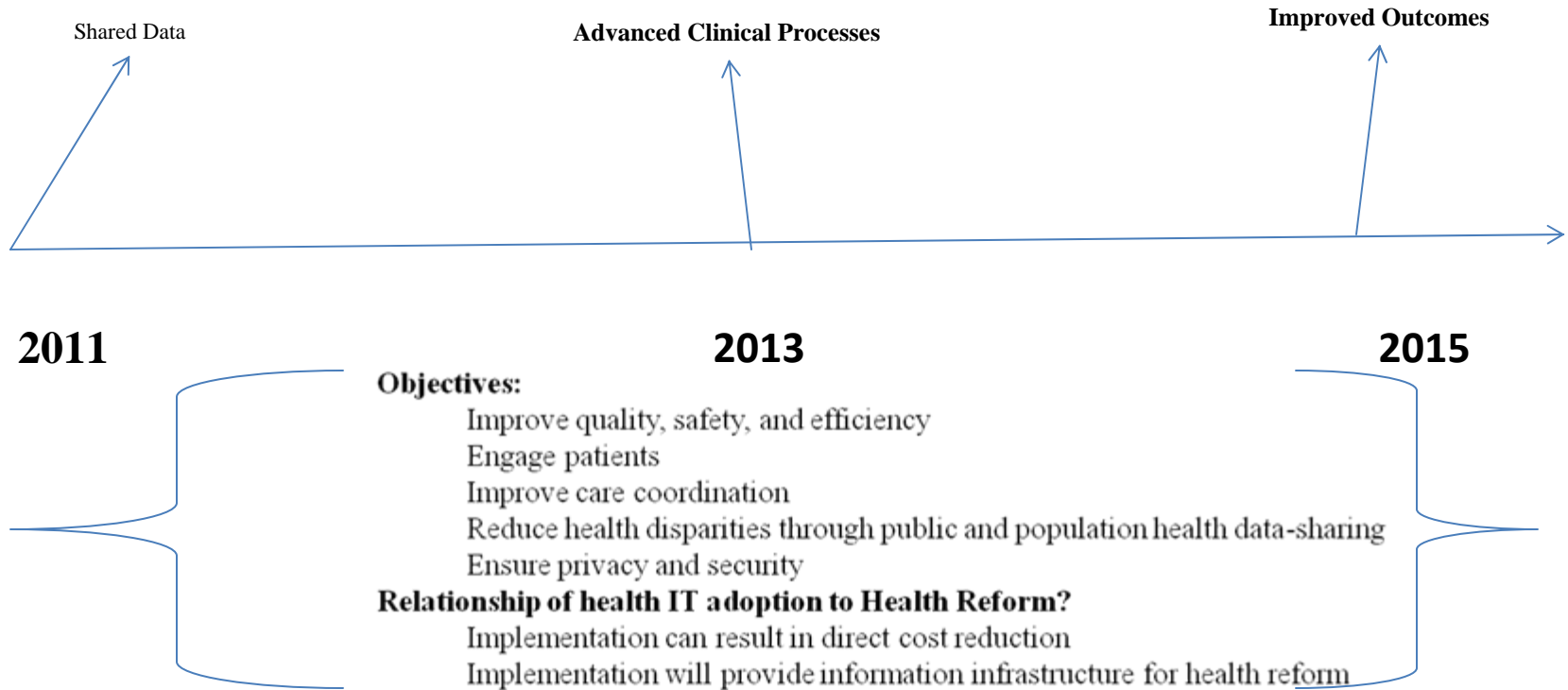


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ARRA HIT Summary

Meaningful Use Workgroup



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ARRA HIT Incentives

- Physicians
 - Adopt certified EHR's by 2011 or 2012
 - Up to \$44,000 over 5 years incentive payments
- Hospitals
 - Incentive payments 2011 – 2015
 - Demonstrating “Meaningful Use”
 - “Meaningful Use” not yet defined
 - Complicated formulated w/ \$2M base + volume/geography/quality & EHR adoption
- Rural Hospital Expected Portion \$3 Million

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ARRA HIT - Hospital “Meaningful Use”

- Demonstrated “Meaningful Use” of EHR technology
- Demonstrated performance during reporting period (2011 – 2015)
- Failed demonstration results in reduced Medicare percentage increase
- Demonstrates satisfaction of Secretary use of certified EHR technology in meaningful manner
- Hospital demonstrates certified EHR technology supports HIE to improve quality of health care
- Hospital submits information to report clinical quality measures & other measures deemed by the Secretary.

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2008 EMR Adoption Model Trends

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| | | 2007 | 2008 |
|---------|---|-------|-------|
| Stage 7 | Medical record fully electronic; HCO able to contribute CCD as byproduct of EMR; Data warehousing/mining | 0.0% | 0.1% |
| Stage 6 | Physician documentation (structured templates), full CDSS (variance & compliance), full R-PACS | 0.8% | 1.2% |
| Stage 5 | Closed loop medication administration | 1.4% | 1.3% |
| Stage 4 | CPOE, Clinical Decision Support (clinical protocols) | 2.2% | 2.2% |
| Stage 3 | Clinical documentation (flow sheets), CDSS (error checking), PACS available outside Radiology | 25.1% | 34.4% |
| Stage 2 | Clinical Data Repository, Controlled Medical Vocabulary, CDSS inference engine, may have Document Imaging | 37.2% | 33.0% |
| Stage 1 | Ancillaries – Lab, Rad, Pharmacy – All Installed | 14.0% | 12.4% |
| Stage 0 | All Three Ancillaries Not Installed | 19.3% | 15.4% |



Rural Hospital & ARRA

- Maximizing ARRA HIT funds over next 6 years
- Developing strategy to meet Meaningful Use
- Improving clinical & financial operations
- Closing Patient Safety Gap
- Improving “Delivery of Health Care”

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Current Environment

- **Meditech – Primary HIS Vendor**
 - Largest HIS Vendor in industry
 - Over 1800 clients in US
 - 200+ in Canada and other countries
 - Privately held in MA
 - Rural Hospital client since early 1990s
 - 3 Major Platforms
 - MAGIC – Totally proprietary OS (Over 900 clients using MAGIC)
 - Client Server – Released in early 90's to compete in Window's world
 - FOCUS 6.0 – Released in 2008

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Current Environment

- Meditech – Release 5.61
 - Finance
 - Patient Financial Services
 - Registration
 - Order Management
 - Laboratory
 - Radiology
 - Pharmacy
 - Major ancillaries
 - Payroll
 - Human Resources
 - Patient Scheduling
 - Scanning & Archiving
- Other Systems
 - PACS
 - ED Information System
 - Fetal Monitoring
 - Home Care/Hospice
 - Claims Clearinghouse
 - 3M Coding
 - MS Office Professional

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Meditech

- Client since early 90s
- Current Release 5.61 (Jan 2008)
- Upgrade to 5.63 in progress
- R 5.63 required to migrate to 6.0
- R 6.0 – 3rd Generation Software
 - Provide Modern Advanced User Friendly Apps
 - Major advancement for Meditech clients
 - High probable Physician/Clinician adoption
 - \$3M Investment

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Network Foundation Budgeted in FY 10

| | |
|--------------------------------------|----------------|
| • Core Switch Redundancy | \$150,000 |
| ▪ Replace obsolete network equipment | 100,000 |
| ▪ Core cable network restructure | 150,000 |
| ▪ Network Management Tool | 50,000 |
| ▪ Wireless | <u>100,000</u> |

Network Total:

\$550,000

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Data Center Foundation Budgeted in FY 09/10

| | |
|---------------------------------|---------------|
| ■ Meditech SAN | \$378,000 |
| ■ PAC's SAN Replacement | 300,000 |
| ■ Enterprise Back Up Project | 100,000 |
| ■ Server Virtualization Project | 150,000 |
| ■ PC Replacements | 150,000 |
| ■ Peripheral Replacements | <u>25,000</u> |

Total: \$1,103,000

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Rural Hospital Preparation

- Continue to Improve Infrastructure
- Define Gaps to meet Meaningful Use
- Meditech 6.0 “Due Diligence”
- Approve strategy
- Establish timelines
- Engage Physician community

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More Information

- WWW.HIMSS.ORG
- <http://www.cms.hhs.gov/apps/media/press/factsheet.asp?Counter=3466>
- <http://healthit.hhs.gov/portal/server.pt?open=512&mode=2&cached=true&objID=1200>

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Questions?

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