



Health Information Community of Ohio Advisory Group Meeting

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Multi-Stakeholder Collaboration to Advance HIT Strategy – New York



Long-term vision: Better information to support purchaser, clinician and consumer decisions

- HIT Implementation Priorities
 - Promote interoperability and clinical data exchange
 - Facilitate performance measurement
 - Improve prevention and chronic care management
- United Hospital Fund Activities
 - NYS HIT Policy Summit Initiative – partnership with eHealth Initiative Foundation (with assistance from Manatt Phelps and Phillips)
 - Goals for the initiative:
 - Help state and local leaders to formulate HIT policies designed to improve quality, safety and efficiency of health care
 - Establish the “value proposition” for HIT adoption and use
 - Identify and resolve key barriers at state and local levels (e.g., legal issues, coordination of incentives)
- Summit process laid the groundwork for multi-stakeholder policy discussion on HIT issues in New York
- HEAL-NY grants: collaborative projects focused on clinical data exchange, electronic prescribing and quality
- Health Care Facilities Commission
- F-SHRP waiver
- Demonstrations: disease management, pay for performance

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- UHF Report to New York DOH – “Role of the State”
 - The state needs to articulate and broadly communicate its strategy to advance HIT adoption and use
 - Primary state responsibilities are allocating and monitoring use of state funds; can also play important policy role in facilitating HIT implementation
 - State should establish mechanism for stakeholder collaboration
 - convene planning committee to spell out functions, governance, etc

1. Value Proposition

- CITL article in Health Affairs (January 2005) describes national model
- UHF grant to CITL for NYS analysis
- Net benefit for NYS = \$12 billion over 10 years, \$4 billion per year with fully standardized interoperability
- Facilitate performance measurement
- Improve prevention and chronic care management

2. Securing “Buy-In” From Stakeholders

- In 2005, DOH asks UHF to prepare report with recommendations
- Qual-IT newsletter provides topical updates and analysis
- State HIT working group focused on communication and policy coordination
- UHF and eHI now developing web-based resource center and information sharing tools
- Smaller regional efforts viewed as more feasible, easier to identify and engage the relevant stakeholders
- Every community should have basic infrastructure for data exchange
- Stakeholder group could establish a new policy governance model

3. Key Barriers and Challenges

- Ongoing Communication and Collaboration
- Priorities for HIT Implementation
- Costs, Benefits and the HIT Value Proposition
- The state should have one voice, we need a blueprint to move forward together
- Laissez-faire approach will take too long

4. Key Lessons Learned

- Multi-year plan for broad statewide adoption
- Technical and operational coordination across disparate regional initiatives through standards and data exchange
- Strategic coordination across the full spectrum of health care interests – hospitals, payers, physicians, consumers
- Medicaid should provide leadership and foster policy alignment to promote HIT adoption and use