

New York Health Homes Learning Collaborative



Session Title: Using Health Information Technology in Health Homes

Initial Questions	<ul style="list-style-type: none"> • How do you currently share patient information across partners? What features are critical? • What barriers exist to effective implementation? • How many health homes have purchased a new software system? And if you have not purchased software, then what system will be using? • Are there mechanisms for real-time notifications of hospitalizations and emergency department visits? Are health homes able to access this information in a timely manner and if not, then what are the technology gaps? • Are health homes putting technology in the hands of patients through patient portals, and if so, what are the benefits and challenges of doing so? • Are Health Homes linked up to RHIOs? If so, how are health homes utilizing RHIOs, and for what purposes? Are there IT gaps that the RHIOs are not able to meet?
HH to Begin Conversation	<ul style="list-style-type: none"> • Madeline Rivera/Shari Suchoff, Maimonides Medical Center • Inna Borik/Amanda Semidey, CBC
Key Issues	<ul style="list-style-type: none"> • Questions around: <ul style="list-style-type: none"> ○ How IT systems interact with EHRs ○ How consent is updated ○ How do you get physicians to buy into system, become part of the workflow • Care Plan specific issues: <ul style="list-style-type: none"> ○ Who signs off on the Care Plan ○ Who has access to it and who can modify it/ who “owns” it ○ Are there medical liability issues around data-sharing, consents, viewing the EHR, etc ○ Is there a process for dynamic consent? ○ Who “owns” the care plan and could there be an issue of medical liability if it’s unclear? • Adoption of software by network partners is critical and requires a lot of upfront work • May not be able to get all of your needed functionality out of one tool • Only one HH has a patient portal
Best Practices	<ul style="list-style-type: none"> • Maimonides shared its workflow process and various tools used to track patient information • Hudson Valley – all health homes are using the same platform • GUI – build system off of existing EHR • Focus on what data fields are critical- there is a risk of overpopulating and obscuring key pieces of information • Strong training program for staff to gain competency in new IT systems and improve adoption <ul style="list-style-type: none"> ○ Consider establishing workflow processes, training manuals to support utilization • Require network partners to use HH’s IT system for their patients • Have IT system also be the roster management tool • Utilize RHIOs as a data sharing hub

Follow-Up Opportunities or Questions with Action Items	<ul style="list-style-type: none">• More clarity wanted around the medical liability issues• More guidance around how various consents interact with each other• Collaboration at the point of the patient- how do you engage the patient through IT• Could health homes use financial incentives to increase adoption/utilization of software?• Connection to RHIOs can help<ul style="list-style-type: none">○ Have menu of prices○ Set of standards
Additional Comments	<ul style="list-style-type: none">• Consensus that health homes need to invest upfront to build out health information systems and key metrics/parameters to include in the systems