



Introducing the Health Information Exchange

Leveraging the HIE for Care Coordination & Population Health

Your Health Information Exchange

Your HIE

Regional Health Information Exchange



Our Mission: Coordinate Care by Connecting **ALL** Providers

WE are Southeast TX's HIE

WE integrate disparate EHRs across the community

WE enable sharing of health information across the ecosystem

WE serve as the foundation for population health management

WE facilitate data exchange to better inform decisions made at the point of care

WE are a 501(c)(3), not-for-profit, here to serve OUR community

Your HIE

Healthconnect Footprint



Our Geography



*Our Collaborators



*A representative sample of our 500+ participants

Our Reach

23 Counties

75%+ Hospitals

40%+ Physicians

5+ Million Patients

300+ Fully-Executed
Participation Agreements

500+ Care Venues

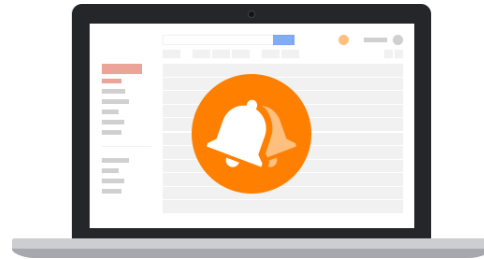
Your HIE

Healthconnect Services



Health Information Exchange

Query and retrieve patient records from across the healthcare ecosystem



Healthcare Notifications

Real-time alerts when patients admitted, discharged or transferred to-and-from facilities



Diagnostic Imaging Exchange

Cloud-based image exchange that enables viewing and sharing of medical images

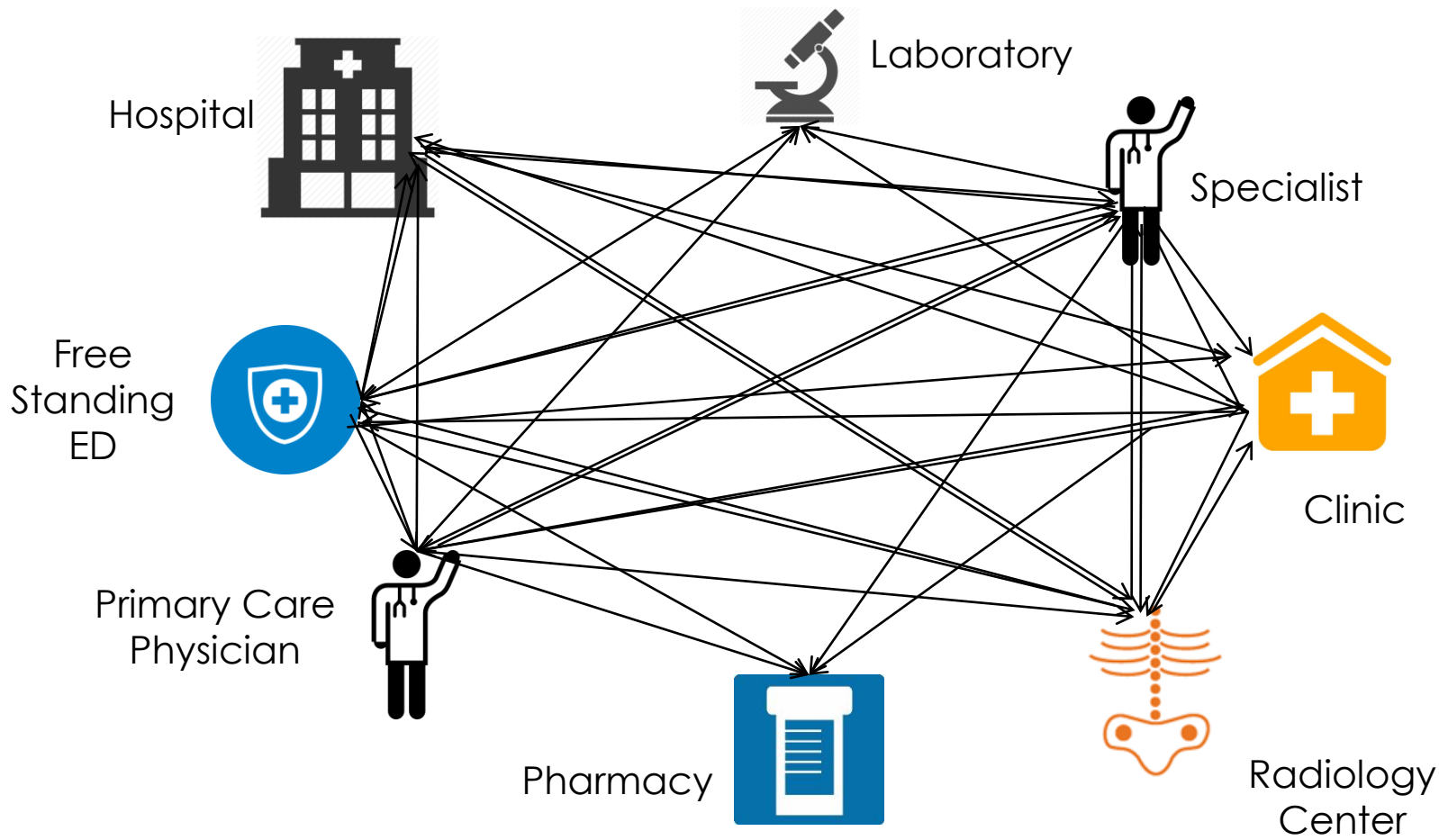


Health Information Service Provider (HISP)

Direct Secure Messaging between providers
Member of DirectTrust and the Trust Bundle

Your HIE

No Regional HIE Model

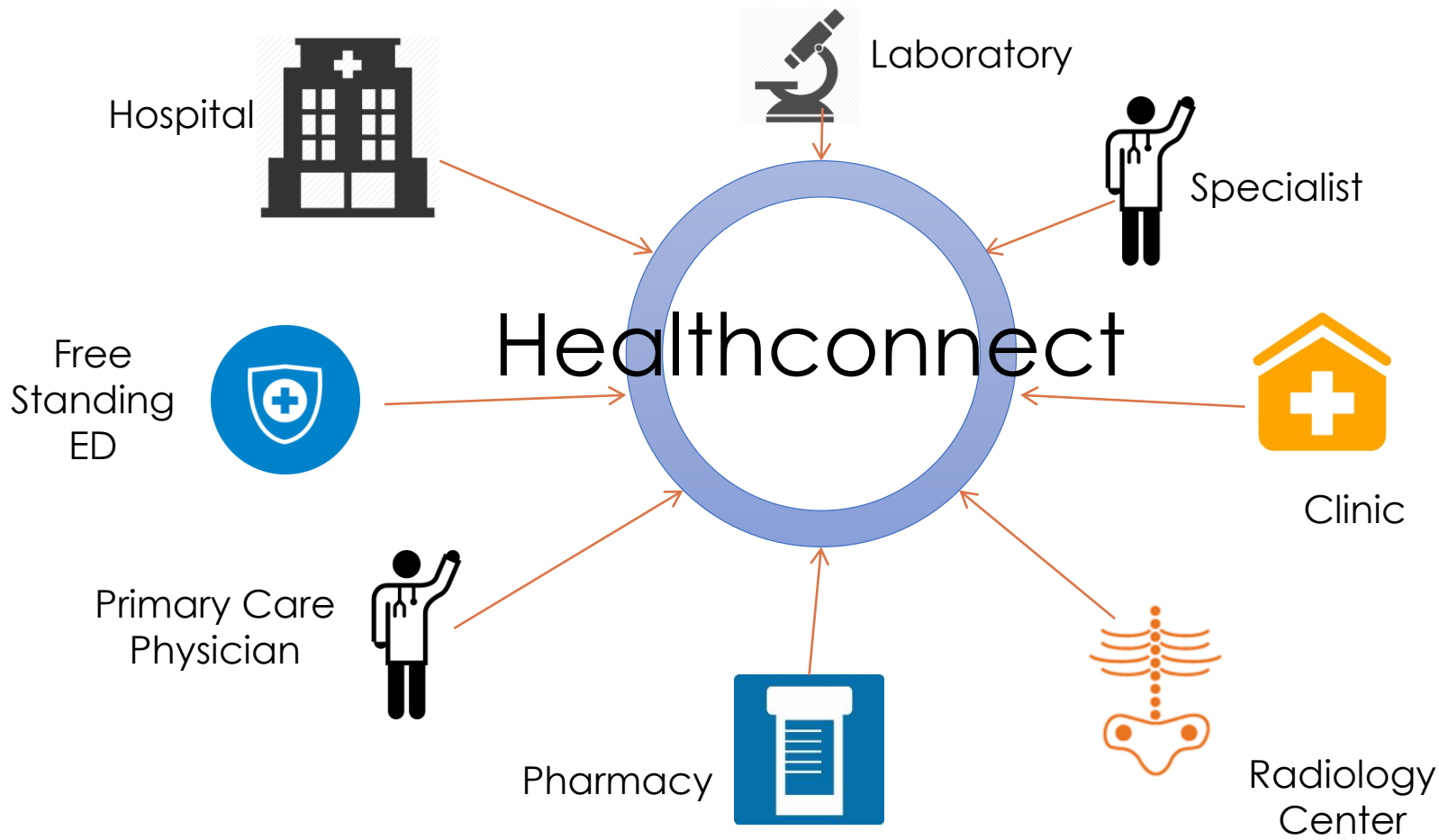


Our World Without an HIE

- Massive amount of point-to-point connections
- Higher costs to implement and maintain
- Complex to manage
- Inefficient to coordinate all care

Your HIE

Healthconnect Model



Our World With an HIE

- One connection
- Lower costs
- Improved efficiencies
- Greater care coordination
- The “Hub” of all data activity

Your HIE Value Proposition



	QUALITY	SAFETY	EFFICIENCY
Assessment	<ul style="list-style-type: none"> Provides historical information Alerts to prior interventions Informs on chronic conditions 	<ul style="list-style-type: none"> Advises current medications Advises on current allergies 	<ul style="list-style-type: none"> Informs of existing labs/rad Narrows problem lists Reduces unnecessary testing
Diagnosis	<ul style="list-style-type: none"> Includes diagnosis histories More complete info for new Dx 	<ul style="list-style-type: none"> Enables diagnosis precision Avoid unnecessary treatment 	<ul style="list-style-type: none"> Better Dx and Rx prevents downstream recurrences
Care Planning	<ul style="list-style-type: none"> Delivers longitudinal records Facilitates holistic care planning 	<ul style="list-style-type: none"> More informed comprehensive care team during transitions 	<ul style="list-style-type: none"> Seamless care transitions Improves accountabilities
E-Prescribing	<ul style="list-style-type: none"> Renders complete drug history Enables informed prescribing 	<ul style="list-style-type: none"> Active medication lists prevents adverse drug events (ADEs) 	<ul style="list-style-type: none"> Reduces reliance on patient recall or pharmacy call-backs
Clinical Decision Support	<ul style="list-style-type: none"> EHR relies on community record to identify best care protocols 	<ul style="list-style-type: none"> More data improves specificity of care = safer care 	<ul style="list-style-type: none"> Narrows field of optimal treatments, minimizes cost

Your HIE

Measuring the ROI



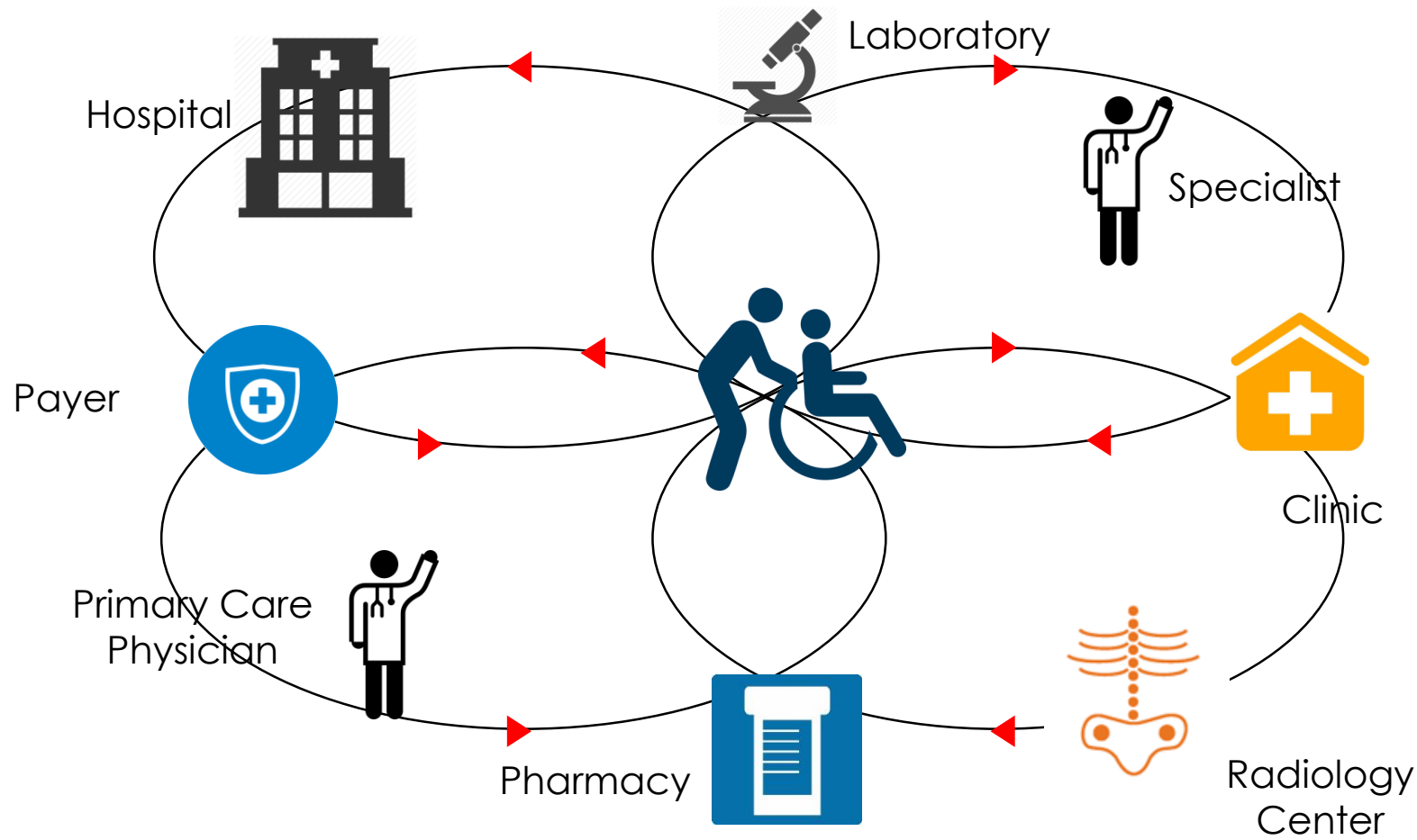
Tests / Events	Rate per 1000	Avg Cost	Total Cost for Beneficiaries	HIE Impact %	Rates Following HIE Impact	Net Cost after HIE Impact	Potential Savings
Labs & Path	145	\$34	\$49,300	11.0%	129	\$43,877	\$5,423
Radiology	50	\$171	\$85,500	11.0%	45	\$76,095	\$9,405
ER/1000	350	\$123	\$430,500	17.0%	291	\$357,315	\$73,185
IP/1000 through the ED	212	\$9,812	\$20,801,440	25.0%	159	\$15,601,080	\$5,200,360
30-day readmission	190	\$9,812	\$18,642,800	25.0%	143	\$13,982,100	\$4,660,700
Total Annual Savings							\$9,949,073

Annual Patients	10,000
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Coordinating Care Through Notifications

Notifications

Coordinating Care is Challenging



Coordinating Care in a Web of Providers

- Patients have multiple touch-points across the healthcare community
- But information doesn't always seamlessly flow
- Communication breakdowns can compromise patient safety, quality, and efficiency
- Wouldn't it be nice if you could monitor patient care throughout the healthcare ecosystem?

Notifications

How This Program Works



- 1 Participant identifies patients to be monitored
- 2 GHH patient repository fed real-time with all patient visits and activity through ADT feeds
- 3 Upon patient and ADT match, alert pushed to Participant

Notifications

The Mechanics of Our Program



Use Cases for Notifications

- Care coordination
- Management of patients at-risk
- Post-discharge care
- Value-based reimbursement
- DSRIP or other alternative payment models



Encounters Monitored

- Admission
- Registration
- Transfer to IP / OP
- Demographic updates
- Visit updates

The Power of a Notifications Program

Scaled quickly

Disease agnostic

Serve large patient pop.

Powered with data

Confer immediate benefits

Aligned with your objectives



Alert Criteria

Population stratification on ICD-10, high-utilizers, zip code, payer type, etc.

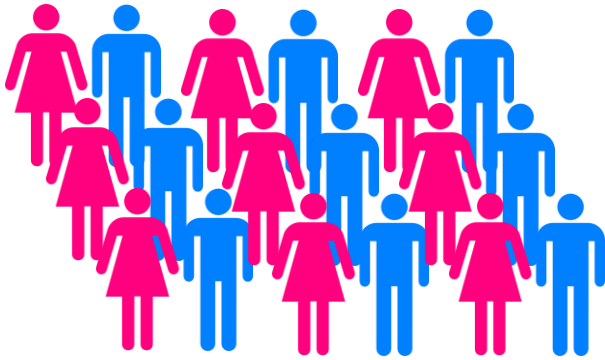


Delivery

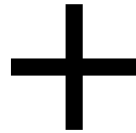
- Real-time, daily, monthly
- Secure email, batch files
- Single / multiple recipients

Notifications

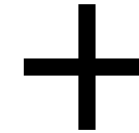
Our Community Reach



Millions of patients monitored



Across 23 Houston counties



Amongst 500+ GHH Provider Participants

Healthconnect's Notifications Program does population health at a massive scale – monitoring millions patients in 23 Houston counties across more than 500 healthcare provider Participants in the GHH network.

Notifications

Value Proposition



Real-Time Delivery

Enables real-time delivery of patient encounter information



Improves Patient Coordination

Facilitates better care coordination of patients across provider community



Lowers Cost of Care

Enables more cost-effective delivery of services esp. when managing populations at-risk



Promotes Better Disease Mgmt.

Supports management of high-risk patients



Reduces Unnecessary Services

Reduces redundant diagnostic testing, hospital readmissions, and over-utilization of services



Aligned With New Care Models

Supports novel care and payment delivery models including ACOs, bundled-payments, at-risk value-based care

Notifications

Renaissance Physicians Case Study



Accountable Care Organization

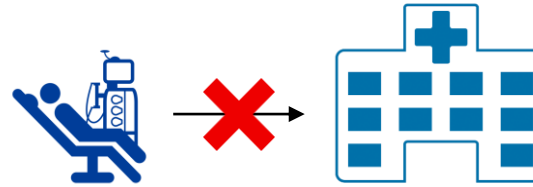


Renal Specialists of Houston, P.A.
Caring for you where you live in your neighborhood.



- RPO-based practice, Renal Specialists of Houston
- Part of a renal-based ACO
- At-risk for care delivery

Reducing Unnecessary Admissions



- Piloting notifications program
- Reducing ED admissions due to missed dialysis treatment

Better Outcomes



- Better disease outcomes
- Improved patient satisfaction
- Cost-savings for ACO, \$5M+ annually

Healthconnect's Notification and Population Health Program with Renal Specialists of Houston is improving CKD disease outcomes, reducing unnecessary hospital admissions, with projected ACO cost savings of \$5+ million.

Notifications

Our Partners



Coordination of care for Medicaid patient populations



Managing patients in Medicare
Shared Savings Program

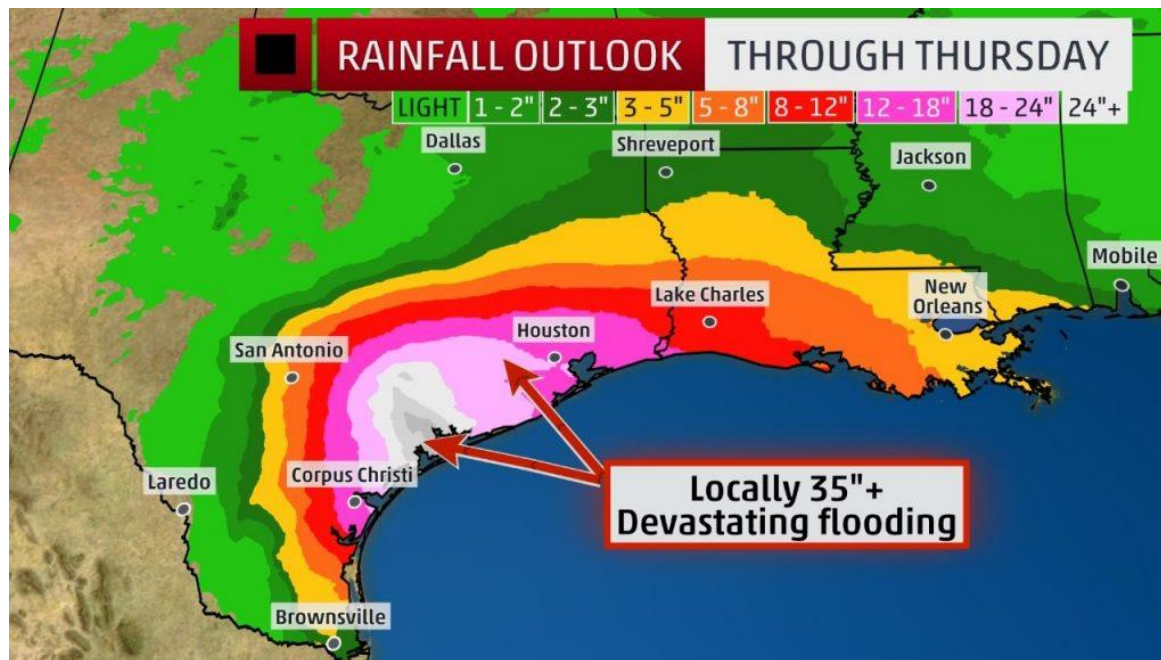


FQHC managing coordination of
care post-hospital discharge

Hurricane Harvey

Hurricane Harvey

Overview



- **August 25-29**, Hurricane Harvey hits the Gulf Coast of Texas
- The storm moves east and stalls over the Houston area, with record 52" rainfall
- Significant devastation and flooding along the coast and inland
- Corpus Christi, Greater Houston, and Beaumont/Port Arthur most impacted
- Storm eventually moved on to Louisiana

Hurricane Harvey Shelter Setup

Megashelters established across state to support 30,000+ evacuees:

- Houston – 2 shelters, 14,000+
- Dallas – 1 shelter, 4,000+
- San Antonio – 1 shelter, 2,800+
- Austin – 1 shelter



Hurricane Harvey

Pressing Need for Medical Histories



Shelters quickly swelled with evacuees...



Many evacuees required medical attention...

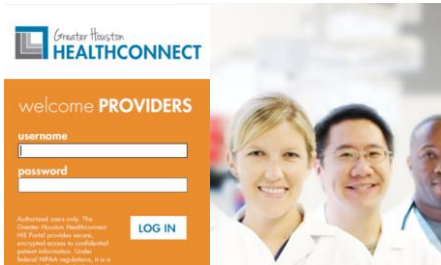


An urgent need arose for access to patient medical information and practice without an EHR!

Hurricane Harvey Mobilization



Portal Provisioning



- CHI – St Luke’s request to provision additional clinicians at all locations ahead of storm
- Coordinate with other HIEs - portal and support for call-ins
- Coverage San Antonio, Austin, Corpus Christi, Beaumont -Port Arthur, Tyler-Texarkana, DFW

Shelters



- Monday organized for need
- Tuesday on-site with evacuees and volunteer clinicians - Confirmed consent and queried for PHI at point-of-care 24x7 thru weekend
- Embedded HIE into triage and clinical workflow. Coordination with Federal DMAT & FMS teams

Call-In Operations



- Remote calls from clinicians to look-up PHI. Read results or send secure email
- 24x7 support for 17 days
- “All hands on deck” – GHH staff and alumni worked after-hours and weekend shifts

Hurricane Harvey

Vignettes



As hospitals became overloaded with phone calls, we became de facto source for information

Similarly, with many pharmacies closed, we were the source for medication data



"I will definitely write very positive things about GHH in my post-storm report"

- Ted Sikorski, MD – DMAT Commander



Steady flow 20+ patients / hr

Call-in operations response time to requests, <2 mins

GHH staff and alumni volunteered time



Most physicians surprised by our capabilities

We were only ones with computers

Patient MO: diabetics, CV, dialysis

Common requests: medications, problem list, labs, notes, radiology

Hurricane Harvey Impact



937

staff hours to support shelters

17

of consecutive days
with 24/7 call-in support

100%

patients who opted in when
asked for consent at shelters

653

total # of records
accessed during Harvey

70%

Records found as % of
total requested

62%

Query requests just looking
for active medications

Thank You!

