INTEROPERABILITY: WHAT CAN AND SHOULD WE REALLY EXPECT?

KLAS Research: Interoperability Study 2016
Presented at AMDIS Physician Computer Connection Symposium
June 23, 2016
How are we feeling about interoperability?
What Does Interoperability Look Like?
• CIO’s /CMIO’s from 30 separate organizations
• 10 Leading EMR vendor:
  • Cerner
  • Epic
  • MEDITECH
  • GE
  • Greenway
  • eClinicalWorks
  • athenahealth
  • Allscripts
  • McKesson
  • NextGen
Created:

• Questionnaire for providers and provider leadership to measure current provider interoperability experience and create a baseline that could be used to measure progress

• Interoperability Measurement Advisory Team (IMAT)
  • 25 members
  • 10 vendor representatives
  • 15 providers/CIO’s
• **Access**: From a clinician point of view, how possible is it to access patient records from an outside organization?

• **Locating**: From a clinician point of view, how difficult is it to find the records I need?

• **Workflow**: From a clinician point of view, are outside records incorporated into my workflow?

• **Impact on Patient Care**: From a clinician point of view, what impact do outside records (shared) have on patient care?

• **Technical Delivery**: HL7, pdf, FHIR, etc.

• **Satisfaction with My Vendor’s Sharing**: How satisfied am I with my vendor’s efforts to support my interoperability?

• **Satisfaction with Other Vendors I Connect To**: Satisfaction ratings for vendors I have connected with
The core of today’s measurements

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<tr>
<th>Measurement</th>
<th>Same Vendor Sharing</th>
<th>Different Vendor Sharing</th>
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<tbody>
<tr>
<td>Availability</td>
<td>Nearly Always&lt;br&gt;Often&lt;br&gt;Sometimes&lt;br&gt;Rarely&lt;br&gt;Never</td>
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Clinicians find that patient records located with critical exchange partners are
- usually available
- simple to find
- viewed within the clinician workflow
- Positively impacting patient care
Same Vendor Sharing

Access
- Always/Often Available (185)
- Rarely/Sometimes Available (205)

Locating
- Easier to Find (135)
- Harder to Find (44)

Workflow
- In the Workflow (118)
- Outside the Workflow (15)

Impact
- High Impact (85)
- Low Impact (29)

Impact Breakdown:
- High Impact (10)
- Low Impact (12)
- High Impact (5)
- Low Impact (6)
- High Impact (6)
- Low Impact (7)
- High Impact (17)
- Low Impact (36)
- High Impact (10)
- Low Impact (13)
Same Vendor Sharing Home Runs vs. Satisfaction
Different Vendor Sharing

Access
- Always/Often Available (118)
- Rarely/Sometimes Available (272)

Locating
- Easier to Find (55)
- Harder to Find (61)
- Easier to Find (46)
- Harder to Find (165)

Workflow
- In the Workflow (35)
- Outside the Workflow (20)
- In the Workflow (20)
- Outside the Workflow (41)
- In the Workflow (32)
- Outside the Workflow (14)
- In the Workflow (79)
- Outside the Workflow (81)

Impact
- High Impact (24)
- Low Impact (10)
- High Impact (13)
- Low Impact (6)
- High Impact (13)
- Low Impact (5)
- High Impact (26)
- Low Impact (14)
- High Impact (14)
- Low Impact (18)
- High Impact (14)
- Low Impact (6)
- High Impact (18)
- Low Impact (57)
- High Impact (30)
- Low Impact (48)
Different Vendor Sharing Home Runs vs. Satisfaction
“I saw somebody that had appendicitis. I typed up my notes, finished them, printed them off, and had the patient carry them to the next provider. Sometimes we fax over records.”

“At this point, we are unable to get any patient data from exchange partners that have different EMR vendors. When we need to access records from other organizations, we just have our patients sign a release form and we fax the form to the other organization. Then the organization faxes the patient records to us, and we scan them into our EMR. We don't electronically exchange data with anyone at this point, and I don't know whether we have ever tried to. I don't think we even know what is available to us.”

“Being connected to the state HIE has been awesome for us. Everything we send out to the other organizations we work with goes out through the HIE.”

Our EMR generates a clinical summary and a discharge summary, but the layout of the clinical summary is not user friendly. The documents don't use sentence structures that can be easily read, and they don't put the important information in clear, easy-to-find places. The information is usually there; I just have to sort to find it.
Thank You

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