The Office of the National Coordinator for Health Information Technology



Central Indiana Beacon Community (Indianapolis, IN)



Overview and Goals

Central Indiana Beacon Community

The <u>Central Indiana Beacon Community (CIBC)</u> is one Awardee of the Office of the National Coordinator for Health Information Technology of 17 ONC-funded Beacon Communities building and strengthening local health IT infrastructure and testing innovative approaches to make measurable improvements in health, care and cost. <u>Meaningful Use</u> of electronic health records (EHR) is the foundation of the exciting work in each community. Funded by the Office of the National Coordinator and led by the Indiana Health Information Exchange (IHIE), CIBC is working to strengthen Indiana's already robust health IT infrastructure and extend its exchange capabilities. CIBC is focused on:

- Improving health outcomes for patients with diabetes by helping providers manage patient performance on measures of blood sugar and cholesterol
- Improving health outcomes by increasing appropriate use of preventive services, such as immunizations and screening for cancers of the colon and cervix
- Reducing hospital admissions and emergency room visits for patients with conditions that could have been treated in an outpatient setting
- Strengthening health IT infrastructure and extending exchange capabilities to help physicians achieve measurable and sustainable improvements for patients

Partners

CIBC's major partners include: the Regenstrief Institute, St. Vincent's Hospital, Wishard Health Services, Purdue Regional Extension Center, HealthBridge, Employers Forum, Indiana Health Information Technology, Inc., and the Indiana State Department of Health.





Central Indiana Beacon Community Background	
Total grant award	\$16 million over three years
Lead grantee	Indiana Health Information Exchange, Inc.
Geography (counties)	46
# of lives affected by a Beacon intervention	2.7 million
# of providers involved in Beacon interventions	160
# of hospital partners	57
# of insurance partners	5
# of FQHCs and community health clinics	7

Strategies and Achievements

Building and Strengthening Health IT Infrastructure

"At Wishard, one of the country's largest safety net health care providers, we are experiencing great success in reducing readmissions for patients with CHF and COPD through the Central Indiana Beacon Community Program. Readmissions within 30 days dropped from 15 percent to 3 percent for the vulnerable patient population serviced by this program. The Beacon Program is, among many other things, allowing more of our primary care providers to better monitor their patients, further enhancing the effectiveness, quality, efficiency, and safety of the care provided throughout our entire system."

> Dr. Lisa E. Harris, CEO, Wishard Health Services, Health and Hospital Corporation of Marion County, IN

Approach: IHIE is one of the oldest and largest health information exchange organizations in the country, connecting over 90 hospitals, long-term care facilities, rehabilitation centers, community health clinics, physicians, and other providers. It delivers the unique Quality Health First® (QHF) preventive health and chronic disease management program, which brings together patient information obtained via partnerships with Medicaid, Medicare, and private insurance companies to help physicians identify their patients who have chronic diseases, address gaps in healthcare, and focus on early patient interventions. CIBC is working to achieve greater impact by adding richer, timelier data to QHF and expanding its reach from its nine original counties to providers in 46 counties.

Progress:

- Under Beacon, CIBC has enrolled more than 500 additional providers in the QHF program.
- CIBC is adding new data from hospitals and other sources and expects QHF to represent nearly 75% of area hospitals by the end of 2012.



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Improving Health, Care and Costs

Approach: Providers participating in the QHF program access data on a wide variety of patient metrics to address chronic disease and improve preventive care in areas including diabetes care, heart health, and women's health. By focusing on better management of a very large group of high risk patients and increased attention to ensuring patients receive recommended preventive care services, providers can demonstrate improvements on these metrics and

receive incentive payments from the health plans which support the system. Under Beacon, CIBC is also expanding the metrics which providers can track using QHF, including valuable new measures on medication adherence and hospital utilization for conditions that could have been treated in an outpatient setting.

Progress:

- QHF providers in the area served by Beacon have seen an improvement of 3.5% in the number of their diabetic patients with acceptable ranges of blood glucose levels (HbA1C).
- The number of diabetic patients with cholesterol levels in acceptable ranges has increased by 1.5%.
- The number of patients receiving recommended cervical cancer screenings has increased by 3.24%.

Testing Innovative Approaches

Approach: Through a partnership with St. Vincent Hospital in Indianapolis, CIBC has established a virtual call center with the aim of reducing hospital readmissions for high-risk heart failure and chronic obstructive pulmonary disease patients following their transition from hospital to home. Patients use videoconferencing devices to communicate with call center-based nurses who ensure medications are correct, monitor daily patient biometrics, and deliver health education. CIBC is also focused on providing a wider variety of stakeholders with access to QHF data, in order to increase transparency and drive further improvements in care quality.

Colorectal Cancer Screening

Early Results: By the Numbers

Data Source: Derived from Claims, Clinical repository, POC, and Provider Reconciliation Data

No of patients included: 103,606 to 113,621





Progress:

- A pilot study using the remote call center is underway; thus far only 3% of patients receiving remote monitoring services have experienced a readmission, well below national averages. Based on strong interest generated by the pilot, St. Vincent is expanding the number of patients who will be offered remote monitoring services supported by the call center.
- Starting this fall, CIBC will begin making QHF data on provider groups available via its Web site. CIBC is also developing reports for regional employers that will display key QHF quality metrics for their employees.

For more information on the Central Indiana Beacon Community visit: <u>http://www.ihie.org/Beacon-Community</u>.

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