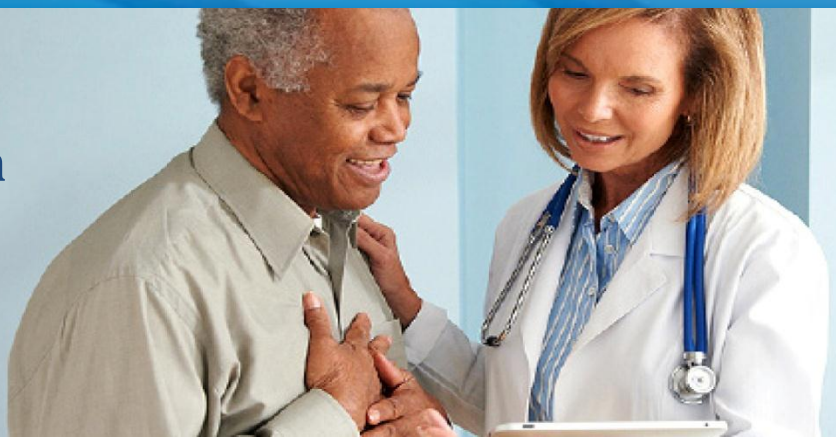
The Office of the National Coordinator for Health Information Technology

The Hawai'i Island Beacon Community (Hilo, HI)



Overview and Goals

The Hawai'i Island Beacon Community (HIBC) is one of 17 Beacon Communities building and strengthening local health IT infrastructure and testing innovative approaches to make measurable improvements in health, care and cost. Meaningful Use of electronic health records (EHR) is the foundation of the exciting work in each community. Funded by the Office of the National Coordinator for Health Information Technology, HIBC focuses on facilitating collaboration involving care coordination and clinical practice redesign across the island health care system and expanding the exchange of health information across the Big Island. HIBC is focused on:

- Averting the onset and advancement of diabetes, hypertension, and hyperlipidemia
- Redesigning primary care to more fully leverage health IT
- Promoting health information exchange (HIE) across the island and with facilities across other islands
- Reducing health disparities for Native Hawaiians and other at-risk populations
- Promoting payment strategies that reward providers for higher value, more effective care
- Reducing 30-day hospital readmissions and avoidable emergency visits for chronic diseases

Partners

HIBC's main partners include: County of Hawai'i, Hilo Medical Center, Hawai'i Medical Service Association (HMSA), North Hawai'i Community Hospital, West Hawai'i Community Health Center, Hawai'i Health Information Exchange, AlohaCare, East Hawai'i Independent Physicians Association, Kona Community Hospital, and Hāmākua Health Center.

Hawai'i Island Beacon Community Background	
Total grant award	$16,091,390 over 3 years
Lead grantee	University of Hawai'i at Hilo, College of Pharmacy
Geography	Hawai'i County
# of lives affected by Beacon interventions	Estimated at 100,000
# of providers involved in Beacon interventions	138
# of hospital partners	3
# of insurance partners	2
# of FQHCs and community health clinics	3

"It is exciting to see the Beacon project continue to move forward. Community health organizations are being united under a shared vision to improve health care and the health of all our people. I know the positive impact will continue to grow."

- Billy Kenoi, Hawai'i County mayor

Strategies and Achievements

Building and Strengthening Health IT Infrastructure

Approach: HIBC is leading two of the first regional health information exchange (HIE) pilots in the state. One initiative, focused on a hospital and area providers in North Hawai'i, is implementing a cloud-based HIE solution capable of exchanging clinical lab and prescription orders, results of the orders (lab results or dispensed drugs), secure messaging between clinicians, workflow presentation via a Web-based portal interface, and other decision support capabilities. Under the second effort, focused on East Hawai'i, HIBC is developing a clinical and claims data repository that will support advanced analytics for population health management and cost containment strategies. In partnership with the Hawai'i Pacific Regional Extension Center, HIBC is also helping providers adopt EHRs and meet meaningful use requirements through the provision of free on-site health IT support.

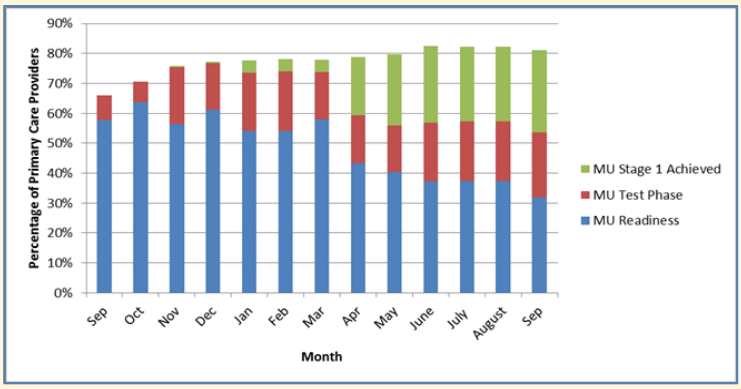
Progress:

- The HIE pilot established in North Hawai'i expects to connect its final partner by the end of 2012, and already includes information on over 10,000 lives.
- Of the island's 138 primary care providers, 82% have implemented an EHR. Of these, 27% have achieved Stage 1 meaningful use.

Improving Health, Care and Costs

Approach: HIBC is approaching systemwide quality improvement focused on patient-centered practice redesign, seamless care coordination across settings, and patient engagement. HIBC's efforts include a 12-month pilot project deploying care coordinators and patient navigators as important components of the provider team to improve care coordination for complex, chronically ill patients (diabetes and cardiovascular disease). For private practices island-wide, HIBC is delivering a structured change curriculum focused on leveraging Meaningful Use and patient-centered medical home transformation, in conjunction with an incentive program conducted by a major commerical payer. An aspect of the curriculum focuses on the use of registries to identify gaps in care using both EHR clinical data and a locally developed software product. The software uses claims data to help the PCMH teams identify gaps in care, which provides real time feedback on quality care process measures. It is used for care management and prevention, and is tied to HMSA's quality and performance incentive payment program.

Early Results: By the Numbers



As of September 2012, 82% of HIBC primary care physicians had adopted an EHR system, were progressing toward meaningful use or had attained meaningful use.

HIBC is also working with three acute care facilities to deploy summary tools that yield standardized patient discharge summaries across all three organizations. HIBC supports hospital participation in a training and mentoring program involving Project BOOST® methodology designed to improve hospital discharge processes and communications with PCPs through their care coordinators. Care coordination efforts are targeted toward increasing information sharing across various types of practices, between PCPs and specialists, and with hospitals, FQHCs, the Native Hawaiian Health Care System, Health Plans, and other non-profits providing support such as Project Vision and the National Kidney Foundation – Hawai'i. In the future, the cloud-based HIE will be used as a patient tracking tool in North Hawai'i for transitions between clinics, physicians, hospital, and long term care. Finally, HIBC is ensuring that culturally appropriate enabling services (e.g., education and self-management skills) are available to care coordinators and hospital discharge planners to help patients manage chronic illness.

Progress:

- Twenty-nine primary care practices serving approximately 25,000 patients are participating in HIBC's practice redesign initiative to adopt the patient centered medical home model.
- 720 high-risk patients, primarily in federally qualified health centers, are receiving services as part of the IT-enabled care coordination pilot.

Testing Innovative Approaches

Approach: HIBC is bringing together community stakeholders through a series of community projects focused on reducing behavioral risk factors, improving nutrition and physical activity, and preventing tobacco use to promote better health and increase wellness in communities throughout Hawai'i County. These unique, community-based programs feature community-driven strategies to address prevention and health behaviors. They also provide care coordinators with options for increasing patient engagement in prevention and management of chronic illnesses. Going forward, these programs will incorporate a focus on patient health engagement and heatlh IT by promoting patients' access to their own health information. Finally, HIBC is testing remote, home-monitoring technology designed to facilitate in-home care management in rural areas and to improve quality, efficiency, and satisfaction for patients with complex chronic illnesses, especially diabetes and cardiovascular disease. Telemonitoring devices offered via Hawai'i Island Care Coordination Services are not linked to any practice based EHR at this time. Instead, the data goes into a central monitoring station and progress reports are provided to the PCP through web based access.

For more information about The Hawai'i Island Beacon Community, visit www.Hibeacon.org.

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