




The Pennsylvania Chronic Care Initiative

IT Challenges

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- The Big Picture - This is not about IT
 - IT is one component of the entire framework

Transformation = Improved Outcomes

Care Delivery Redesign



Medical Claims



Premium Payments



Incentives

HIT – EHR, HIE



■ The Challenge – How to get patient data to primary care providers

- EMRs are encounter based
- Patient data exists in other systems
- Broad connectivity does not exist



■ What data should be shared?

- Problem lists
- Medications
- ED visits
- Hospital discharge summaries

Example – Medications

- During an inpatient stay a hospitalist changes the patient medications
- Upon discharge the primary care provider is not aware of the change
- The patient calls the primary care provider with problems and is referred to the ED

■ Example – Discharge Summaries

- From PHC4 –There were 57,852 readmissions for any reason in 2008 (for the 21 categories for which readmission ratings were reported). These readmissions amounted to approximately \$2.5 billion in charges and 350,000 hospital days.
- Work at University of Pennsylvania School of Nursing and at Geisinger Health Plan show that if a care manager sees a patient within 24 hours of discharge readmission rates may decreased by 30% or more.



Solutions

- Low-Tech
 - Phone calls
 - Faxes
- Medium-Tech
 - Payer-based web portals
- High-Tech
 - Health Information Exchange – Clinical Messaging

Additional Information

Link to the Chronic Care Commission's Strategic Plan

<http://www.rxforpa.com/assets/pdfs/ChronicCareCommissionReport.pdf>

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