

Health Information Technology Knowledge Needed by Community-Based Organizations / Home and Community-Based Services in the Changing Models of Care Delivery

Summary Report
November 2015



Stratis Health, based in Bloomington, Minnesota, is a nonprofit organization that leads collaboration and innovation in health care quality and safety, and serves as a trusted expert in facilitating improvement for people and communities.

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New health care payment models are putting greater emphasis on community-based care coordination.

Laying the Groundwork

Community-based organizations and home and community-based services (CBOs/HCBSs) that are part of the Twin Cities Aging Network were surveyed to assess which health information technology (IT) and health care industry trends are important for them to know as they navigate the changing models of care delivery. The survey results lay the groundwork for understanding how to prepare CBOs/HCBSs to work with health care organizations in the new models of care.

New health care payment models are putting greater emphasis on community based care coordination. Accountable care organizations, integrated health partnerships, accountable communities for health, and patient-centered medical homes all work toward the goal to continually improve health care quality and patient experience while reducing overall costs.

To thrive in these models, health care professionals in clinics and hospitals find they need to work together with specialists, pharmacists, mental health professionals, staff in community services, and others to provide patient-centered, coordinated care. CBOs/HCBSs have been exploring how to strengthen these relationships.

The Twin Cities Aging Network (TCAN) is a collaboration of social service organizations serving older adults throughout the seven-county metropolitan area. TCAN members are CBOs/HCBSs that support population health through care coordination, daily living support, caregiver support, and delivery of evidence-based self-management programs.

The Metropolitan Area Agency on Aging (MAAA) convened the Twin Cities Aging Network in a learning community under an Administration on Community Living technical assistance grant to increase business acumen. TCAN is working to enhance relationships with health care organizations, to partner in providing home and community-centered care for older adults with complex needs and their care partners.

As part of TCAN knowledge building, MAAA sponsored a three-part training series, led by Stratis Health, on health IT and health information exchange (HIE). The goal was to increase understanding of terminology, rules, tools, and processes of health IT so the organizations can remain vital and vibrant within the framework of value driven health care.

Stratis Health conducted a survey at the final training on June 3, 2015, to assess which health IT information and health care industry trends are important to share with CBOs/HCBSs as they navigate the changing models of care delivery. The roles of the 27 survey respondents included administration (14), IT (3), operations (4), and other (5). Eighteen social service organizations were represented.

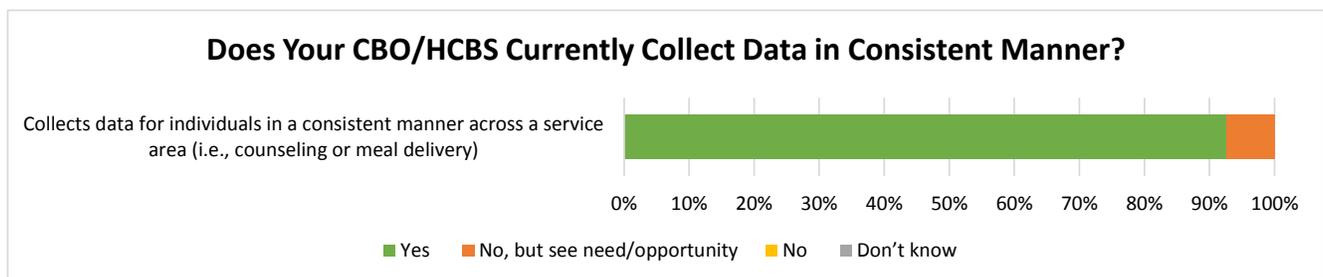
The survey assessed current activity related to HIT and importance of understanding topics in these categories:

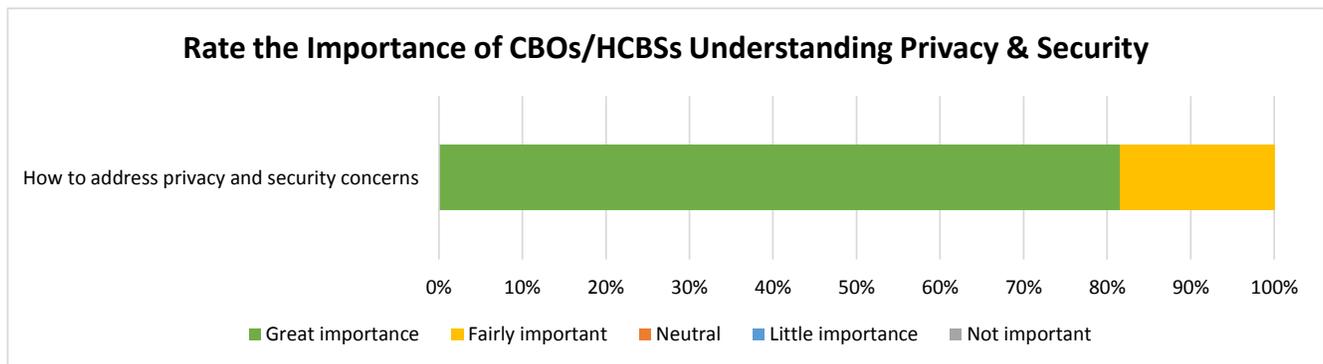
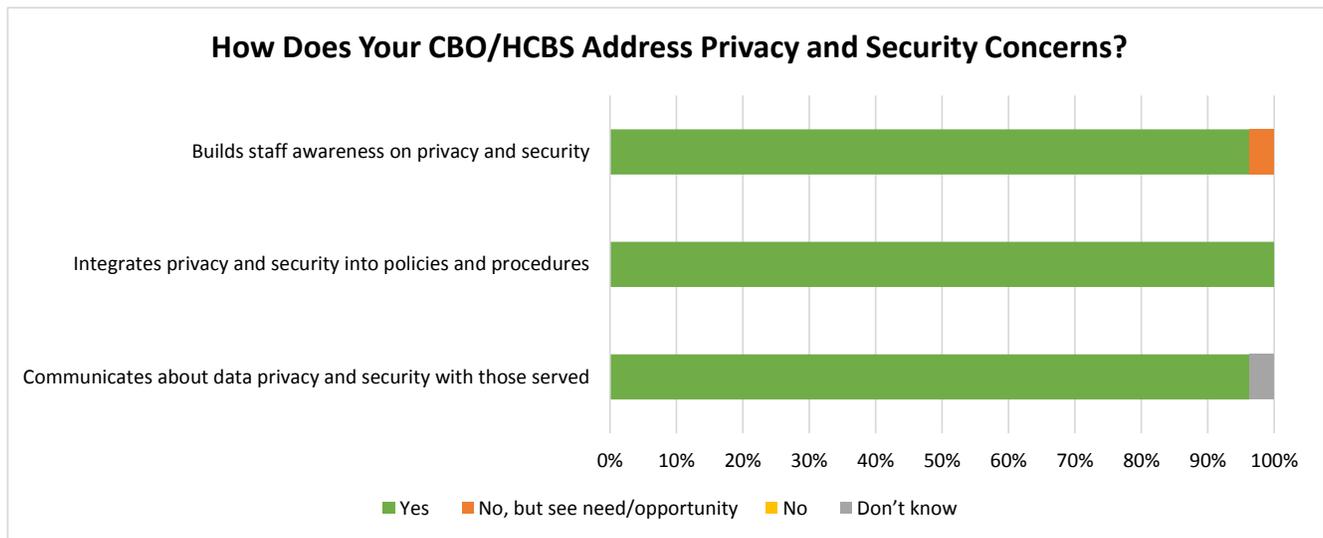
- Data collection and privacy
- Sharing data with others
- How CBOs/HCBS fit in the big picture of health care delivery
- Basics concepts and practices of health information exchange

Survey Responses and Themes

Of survey respondents, 92.6 percent collect data for individuals in a consistent manner across a service area (i.e., counseling or meal delivery). Nearly all respondents indicated that privacy and security concerns are being addressed (awareness 96.3 percent, integrated into policies and procedures 100 percent, and communicate with those served 96.3 percent). 100 percent of respondents indicated how to address privacy and security was important (great importance 81.5 percent, fairly important 18.5 percent).

Theme: CBOs/HCBSs uniformly are undertaking some tasks that contribute to success with health IT. Collecting data in a consistent manner is a critical foundation for robust data tracking and data sharing across organizations. The importance of privacy and security is well understood by CBOs/HCBSs and they have the necessary practices in place. These underlying practices will support their exchange of information across settings of care.



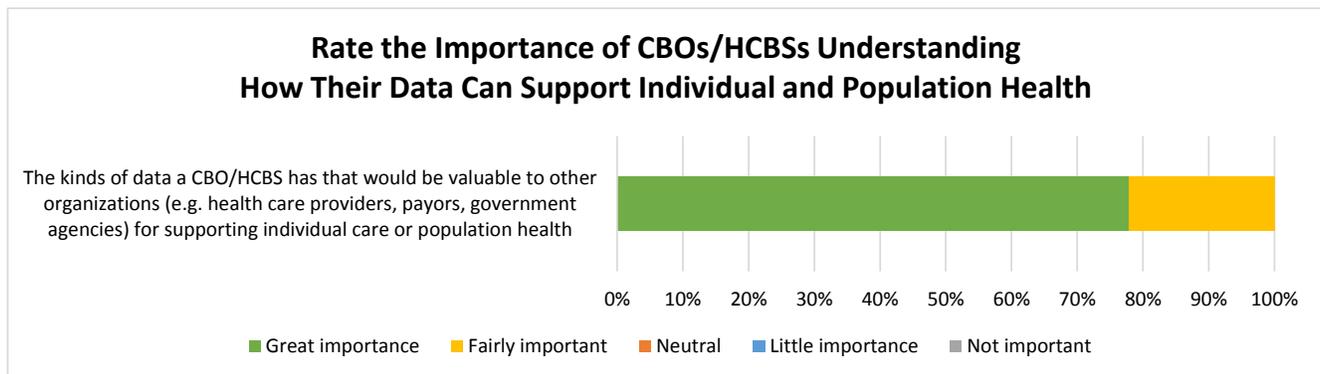
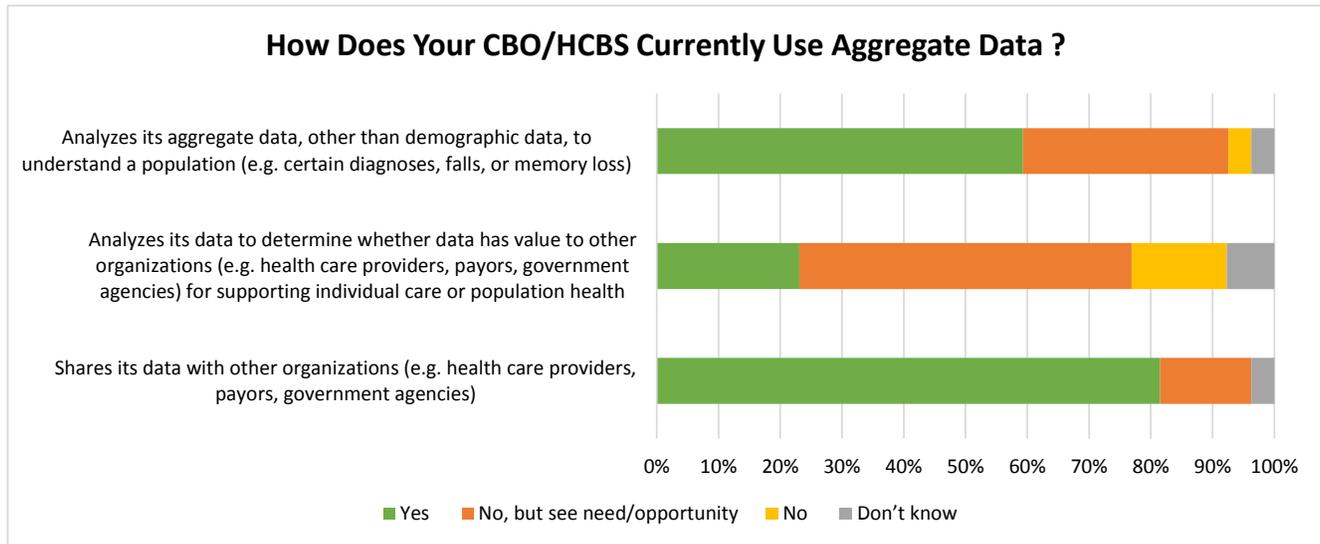


59.3 percent of respondents currently analyze their aggregate data, other than demographic data, to understand a population (e.g., certain diagnoses, falls, or memory loss). Another 33.3 percent see the need/opportunity to analyze their data. Only 23.1 percent analyze the data to determine its value to other organizations (only 26/27 responded to this question), while 81.5 percent currently are sharing data with other organizations (e.g., health care providers, payors, government agencies).

77.8 percent of respondents indicated it is of great importance to understand the kinds of data a CBO/HCBS has that would be valuable to other organizations (e.g., health care providers, payors, government agencies) for supporting individual care or population health. The remaining 22.2 percent thought it was fairly important.

Theme: The high level of information sharing with other organizations in conjunction with the lower rate of analysis may indicate that the CBOs/HCBSs analyze and share data primarily for tracking level of service delivery, and identifying opportunities to improve services or increase capacity. CBOs/HCBSs have an opportunity to tap into their rich data sets for further understanding of and planning for population health. All of the

survey respondents indicated that understanding data for supporting individual care or population health is important. More work needs to be done to support CBOs/HCBSs with how to analyze and present their data to partners to inform community health planning.

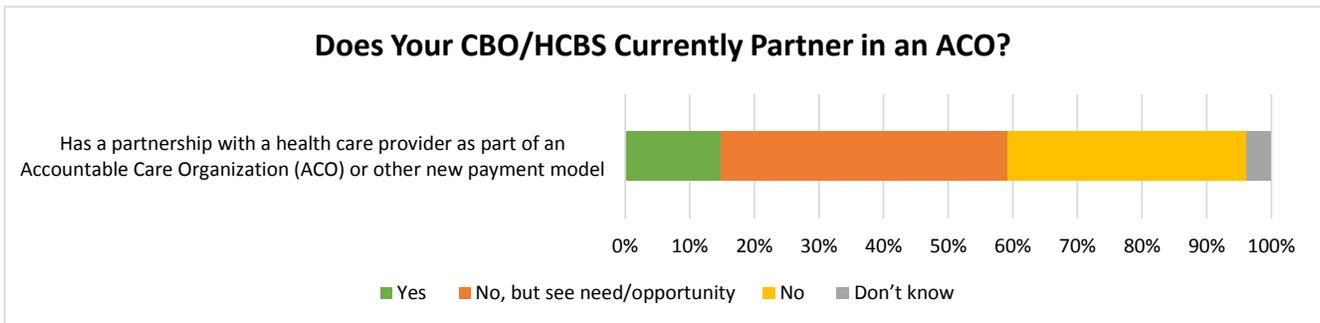
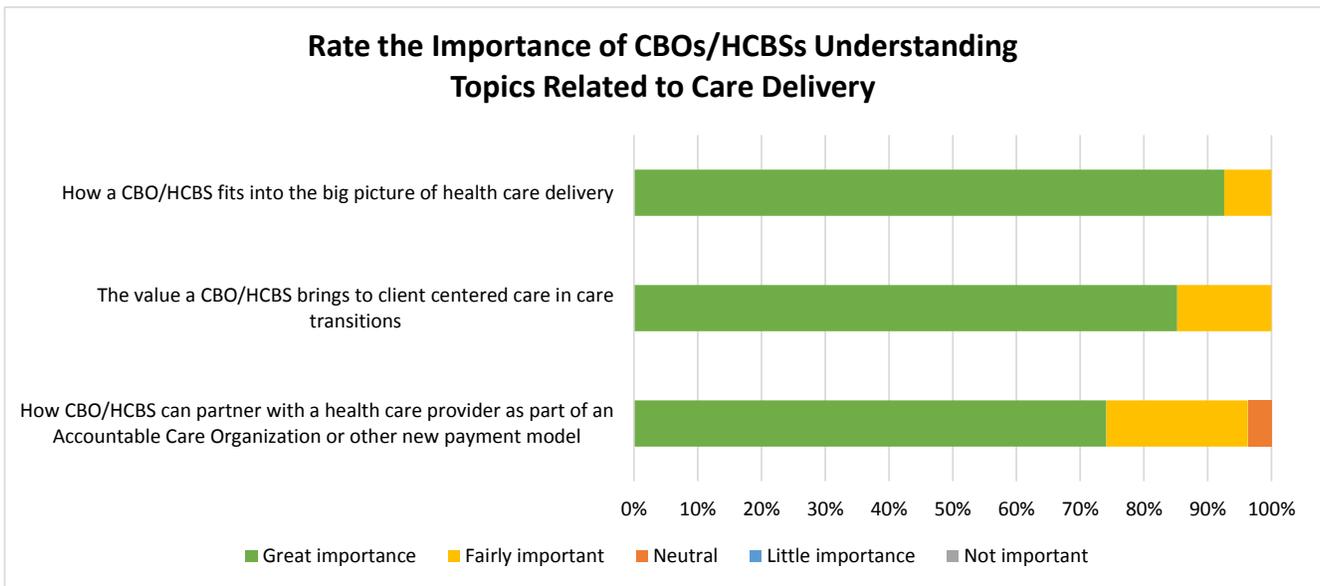


All respondents indicated the importance for CBOs/HCBSs to understand two foundational topics related to changing health care delivery model. 92.6 percent indicated it is of great importance to understand how a CBO/HCBS fits into the big picture of health care delivery, and 85.2 percent indicated it is of great importance to understand the value a CBO/HCBS brings to client centered care in care transitions.

Somewhat less important to respondents was how CBOs/HCBSs can partner with a health care provider as part of an Accountable Care Organization (ACO) or other new payment model, with 74.1 percent rating it of great importance and 22.2 percent as fairly important.

37 percent of respondents reported partnering with a health care provider as part of an ACO or other new payment model, with an additional 44 percent seeing the need for such partnerships.

Theme: A limited number of CBOs/HCBSs actively are working in partnership with health care providers and payors to support care coordination and living at home. CBOs/HCBSs recognize the need to reframe their services to be viewed as part of the net of care that supports individuals in achieving their own level of optimal health and wellness. Social service organizations need to be able to position their services—care coordination, daily living support, caregiver support, and delivery of evidence-based self-management programs—as tools that advance the health care delivery goals of better care for individuals, better health for the population, and lower cost through improvement.



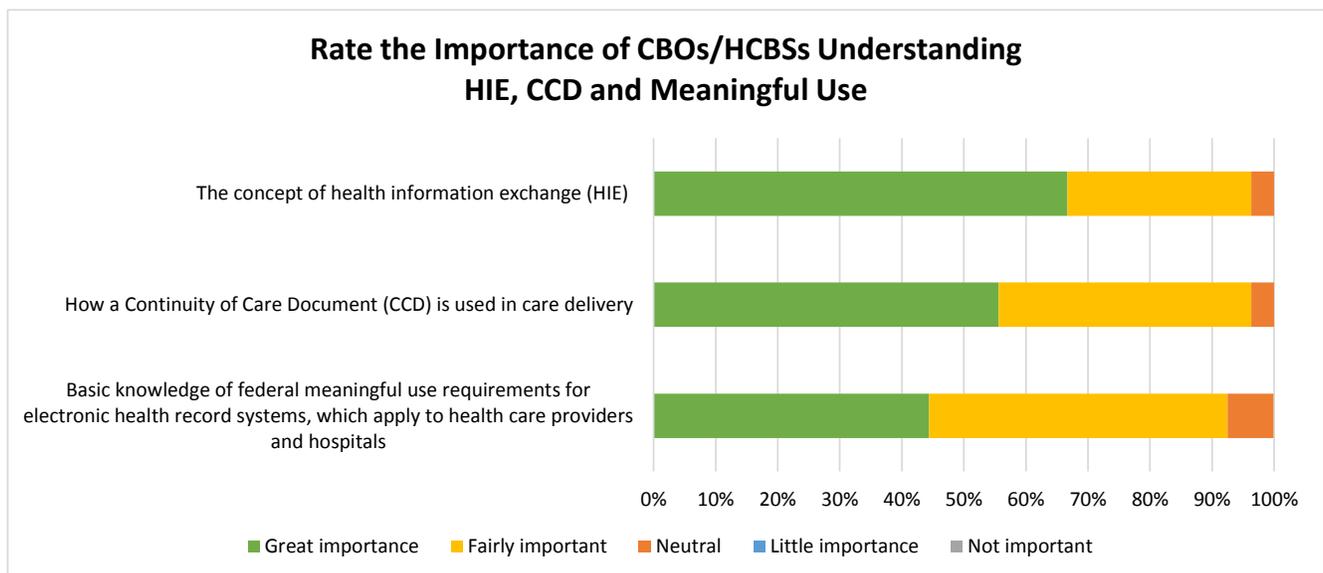
93.6 percent of respondents rated as important understanding both the concept of HIE (66.7 percent great importance, 29.6 percent fairly important) and how Continuity of Care Documents (CCD) are used in care delivery (55.6 percent great importance, 40.7 percent fairly important). A CCD is an electronic document exchange standard for sharing patient summary information. Summaries include the most commonly needed pertinent information about current and past health status in a form that can be shared by all computer applications, including web browsers, electronic medical record (EMR) and electronic health record (EHR) software

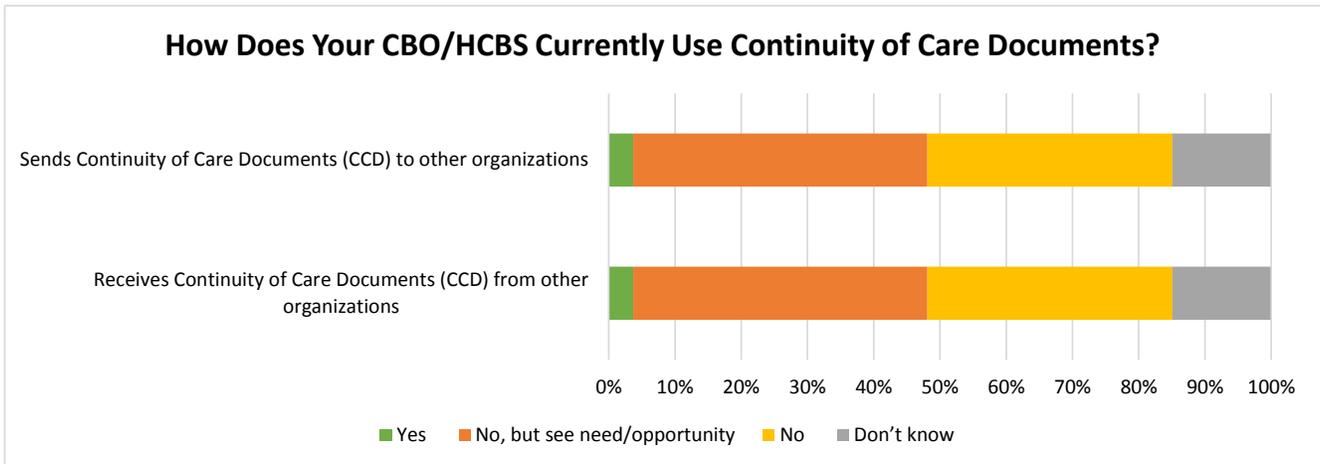
systems.¹ Only 1 respondent (3.7 percent) reported sending and receiving CCD with other organizations, while an additional 44.4 percent saw the need to send and receive CCD.

Of the topics presented, respondents rated lowest the importance of understanding basic knowledge of federal meaningful use requirements for electronic health record systems, which apply to health care providers and hospitals. Only 44.4 percent thought it was of great importance and 48 percent fairly important.

Theme: CBOs/HCBSs still are digesting how to see themselves within the changing health care delivery model. While they realize the importance of understanding the components that support participation in these models—such as HIE, CCD and meaningful use—the organizations need to start with understanding the big picture of how to reframe their work within this new context.

CBOs/HCBSs need to begin to understand the components that support care integration across settings. This is a complex body of knowledge. CBOs/HCBSs need to understand the terminology, rules, tools, and processes of health IT so they can effectively engage in dialogue with potential partners in supporting community health in the world of value driven health care.





Summary

This MAAA sponsored training series allowed people across community-based organizations and home and community-based services to hear the same message about the need to use data to present their organization’s value proposition to health care providers. The training also set the stage for understanding that health IT, with interoperable EHR and effective HIE, will be essential underlying tools to build and support these relationships, and to manage populations and add value. Much of health IT is new to social services and repetition is valuable for understanding the wide range of new concepts.

Today’s emphasis on more effective care coordination is only the beginning of the integration needed to foster enhanced patient experience, greater patient engagement, and appropriate health care utilization. CBOs/HCBSs work is complex and the organizational cultures generally are different from those of health care providers and payors. A common language and understanding between the groups is needed.

Training participants expressed an appetite to continue learning about how they need to evolve to remain relevant. This work was one step to increase knowledge that will lead to building bridges between social services and the health care system to best support patient care. Strong collaborative relationships will be essential in the future to support care delivery. Part of the sustainability landscape for home and community-based providers will be partnerships with health care entities. Forming provider networks is critical to offer scale for impact as health reform continues to evolve.

¹ <http://searchhealthit.techtarget.com/definition/Continuity-of-Care-Document-CCD>, viewed July 30, 2015.