



Everything Michigan

Electronic exchange begins connecting health care providers

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Mark Sanchez | Business Review West Mich...



Doug Dietzman, executive director of Michigan Health Connect

Providing a platform for doctors to electronically access diagnostic test results is just the start for the newly formed **Michigan Health Connect**.

The regional health information exchange, based in Grand Rapids, in the future aims to offer clinical messaging that pushes data about a patient from a hospital to a doctor's office, as well as add capabilities that would enable emergency room physicians, for instance, to access medical data about patients who are unable to relay that information on their own.

"We have far more in front of us than behind," Executive Director Doug Dietzman said. "This has always been the promise — how can we better connect the medical and health care environment. Many are trying, blog.mlive.com/.../print.html?entry=/2...

and there's so many challenges ahead of us, but the technology is getting to a point where things that couldn't be done in the past are becoming much more viable. We can do that now.

"And I really see that while there's more runway in front of us, it's a runway that's much more visible. You can see what the path is now, and our task is to execute on it, add value to it and not to get lost in the clouds."

For now, the health information exchange offers participating care providers the ability to exchange clinical data via a password-protected electronic "drop box" that replaces the need to transmit paper records. The goal is to allow the efficient exchange of a patient's clinical data across the care continuum, leading to improvements in the quality of care.

Dietzman cites results from a survey Spectrum Health conducted last year in which more than 80 percent of physicians who used an electronic drop box the health system offered to paper-based offices "believed that they had improved patient care, that they were taking better care of their patients by getting that data electronically." More than half of the doctors indicated they believed their own efficiency and productivity had improved, Dietzman said.

The not-for-profit Michigan Health Connect came together in March, formed by Spectrum Health and Metro Health in Grand Rapids, Lakeland HealthCare in St. Joseph, Petoskey's Northern Michigan Regional Medical Center and Novi-based Trinity Health, which has six health systems in Michigan, including Saint Mary's Health Care in Grand Rapids, Mercy Health Partners in Muskegon and Battle Creek Health System.

Flint-based McLaren Health Care, the owner of eight regional medical centers, joined Michigan Health Connect in June, and "we're having conversations" with other health systems as well, Dietzman said.

Dietzman spoke with *Health Monthly* recently about the venture.

What's the promise of Michigan Health Connect?

To take the investments we are already making in clinical messaging and get the results out to offices. Basically what we're trying to do is take the friction out, move to an electronic world, help organizations that are required by federal statute to meet "meaningful-use" requirements that have just come out. A number of those require connectivity outside the walls of the individual practice.

So, as a health information exchange, Michigan Health Connect is going to be focusing on facilitating the community connectivity to ultimately, and most importantly, help take better care of patients and make sure the data is where it needs to be, and to drive out some inefficiencies related to paper and the other things.

You started with a half-dozen health systems and recently added McLaren. How large can this get, and how many members optimally would you like to have?

With that group, we cover a good chunk of the state. If we stayed there, we have more than enough to do, and we can make a very positive impact.

We are talking to others, and we anticipate there are others that may want to participate, particularly at the community level.

So having that broad coverage from an anchor member, I don't see we need too many more big anchors. But from a community hospital perspective, there are critical-access hospitals and there are community-based hospitals that are throughout the counties in the area that we cover, and we would hope and expect that we would bring the platform to all of those so we, across all of that area, would have everybody connected into the same platform.

Why should a community hospital do that?

From a federal standpoint, the requirements for connecting outside yourself are there, whether it's meaningful use or other things. Even in paper, every day we are exchanging data, we're just exchanging it on paper. As more and more physician practices move to electronic records within the walls of their practice, they don't want to keep getting paper thrown over the wall that they then have to scan or somehow figure out how to get into their electronic medium.

So, as practices become electronic, the need to integrate electronically is going to increase, and hospitals that can't do that for the doctors that are moving their practice to an electronic system are going to struggle. They're going to get pressure from those practices that say, "We made our office electronic — I don't want to get paper from you any more. I want that electronic connectivity."

And if each hospital has to build that capability on their own with each of the vendors that are out there from an EMR standpoint, it's a tremendous amount of work.

What Michigan Health Connect is hoping to do is say, "Let us be that clearinghouse in the middle. We'll make that connection with you. You feed us that data, we will help make sure it gets to the right provider, in the right format, based on what that provider wants and needs."

Right now you're focusing on exchanging clinical data. What's next? What other areas will you look to bring aboard?

One component of our solution set will be clinical messaging. The second part of that then will be the whole collation of data by clinicians to take care of patients as they move around the community.

The example would be that if I show up in the emergency room, having been in an accident, unconscious on a gurney, that emergency room physician can go and get a (medical) profile for what things have happened and what is known about me and be able to do that in a way, of course, that is secure, that maintains the

appropriate levels of privacy.

What's the better benefit — the operational efficiencies or the ability of doctors, perhaps, to practice better medicine?

I don't know if it's an either/or answer. I think it's going to be one of those that's a both.

Everybody talks about there's too much waste and inefficiencies in health care. So clearly anything that we do has to address how we can wean out those costs and address things that just do the things that are truly value-added and get rid of the stuff that spends money unnecessarily.

So efficiency has to be a big part of it. But the promise of doing things electronically, ultimately, is to benefit the patient, as well.

A physician who's got 2,000 charts in his office and he's caring for those 2,000 patients, in that paper world, there's no way he can keep up on all the diabetics, asthmatics and those with heart conditions that need to be coming in at some certain time or need to have certain things done over. It's just impossible to keep up with.

As those things become more electronic, now the alerting and those sorts of things (happen) that not only drive inefficiency out but also ... make sure you're taking care of those folks.

That's the promise of digitizing health care and getting more and more of it electronic.

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