

# Redwood Health Information Collaborative

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# On Tap Today

- What is HIT really about?
- Who cares about HIT?
- AT 50,000 feet, what is being done?
- Closing thought

# How did we get here?

- Concerns about escalating health care costs drive search for new efficiencies
- Awareness that IT can improve quality of patient care
- Since 2004, health IT has grown as a part of a solution



- *What is HIT really about?*

For some, it's about electronic health records...

“Within ten years, every American must have a personal electronic medical record.”

President George W. Bush – 2004

# For others, it's quality of care



And for vendors, it's the next best thing to dot coms !



*But that's not the real value of HIT...*

The real value of HIT comes from the ability to exchange information electronically



*Follow the money*

# What is the business case for HIT?

- Improve quality of care
- Reduce cost of care
- Spark economic development
- Compete globally



*A huge impact*

# Who cares?

- Patients
- Employers
- Medical Professionals
- Insurers

And some other very important people...



## At the federal level...

“Using Health IT, Information technologies, not just for billing but for maintaining medical records, for communicating between doctors and nurses and pharmacist. To reduce errors, to reduce bureaucracy.”

President-Elect Obama (2008)

# And right here in California

“Expanding health information technology is a major component to comprehensive health care reform: it improves access to underserved Californians, increases patient safety and reduces overall health care costs.”

Governor Schwarzenegger (2008)

# And it's not just rhetoric

- Executive Order S-12-06
  - a 100 percent electronic health data exchange by 2017
- Expansion of Broadband capabilities to rural clinics
- E-Prescribing by 2010

# Executive Order S-12-06

- Making health information available quickly at the point of care and ensuring its confidentiality;
- Improving safety, reducing medical errors, and avoiding unnecessary medical procedures;
- Improving patient care coordination among health care professionals and hospitals, clinics, pharmacies, skilled nursing facilities, and other entities;

# Executive Order S-12-06

- Providing consumers with their own health information to encourage them to participate fully in their health care decisions;
- Ensuring access to specialists in rural and underserved areas through technologies such as telemedicine and telehealth; and
- Reducing administrative costs due to greater efficiencies

# Expanding Broadband

- Executive Orders:
  - S-12-06 Sustainable business model to connect rural health clinics to medical centers
  - S-23-06 Creation of Broadband Taskforce
    - Health Care Workgroup to promote accessible, efficient healthcare, prevention and education using Broadband technologies

# E-Prescribing by 2010

- Recommended by the Institute of Medicine and the Governor
- Increased use of e-prescribing over a ten year period could
  - Reduce federal health expenditures by up to \$29 billion
  - Prevent nearly 1.9 million adverse drug events
- Approximately 70% of the safety and savings advantages result from doctors being given immediate access to patient medication histories, safety alerts, and preferred drug options

# E-Prescribing by 2010

## Medi-Cal e-Prescribing will

- Deliver essential data for a successful e-Prescribing project
- Identify security and privacy policies and procedures
- Provide outreach, training and support to Medi-Cal providers
- Use the Electronic Pharmacotherapy Risk Management (ePRM) system developed by Utah Medicaid

# So, why is this important

Let me tell you of a child who lives in  
Mendocino County.

# Questions?