CASE STUDY

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Union Hospital of Cecil County Improves Care Efficiency With Multiple Health Information Exchange Strategy

Union Hospital of Cecil County is a full-service community hospital located in Elkton, MD. The 83-bed, not-for-profit organization has been nationally recognized for clinical excellence in the treatment and prevention of disease, achieving HIMSS Stage 7. Union's 1,000 employees (including 360 physicians) offer outpatient, surgical, and emergency services — as well as a wide range of community education programs.

Introduction

Situated near the Delaware border, Union Hospital serves a diverse patient community coming from multiple states, thereby making access to information more challenging but also more important. To effectively serve patients moving between multiple states for treatment, Union opted to share information with multiple HIEs rather than solely using interfaces. Union became a member of Maryland's Chesapeake Regional Information System for our Patients (CRISP) and the Delaware Health Information Network (DHIN).

OPPORTUNITY

Union Hospital of Cecil County, situated in Maryland near the Delaware border, serves patients crossing state lines in Maryland and Delaware. As part of their HIMSS Stage 7 achievement, Union Hospital improved care quality as well as the clinician and patient experience by sharing information with two local Health Information Exchanges (HIEs).

SOLUTION

Using MEDITECH's EHR, Union is sharing important clinical information such as lab results, procedures, imaging, alerts, summaries of care, etc. with Maryland's Chesapeake Regional Information System for our Patients (CRISP) and Delaware Health Information Network (DHIN). They are also using these HIE connections to serve as the central source for information to provide better quality care for patients, and more efficient and cost-effective workflows for clinicians.

BENEFITS

- Access to patient summaries and results embedded within the physician's workflow, enabling greater efficiency and resulting in one hour less of paperwork daily.
- Shared medical information between care settings and improved communication between patients and clinicians, prevents repeat testing and long wait times while improving the patient experience.
- Reduced organizational costs related to EHR interfaces, by participating in Healthcare Information Exchanges (HIEs).

^e Chesapeake Regional Information System for our Patients (CRISP)

Exchanging information with 71 hospitals, Chesapeake Regional Information System for our Patients (CRISP) is a regional Health Information Exchange (HIE) that serves Maryland and the District of Columbia, while collaborating with Delaware, Northern Virginia, Pennsylvania, and West Virginia. Together, these states have a vision to advance health and wellness by deploying health information technology solutions adopted through cooperation and collaboration.

Delaware Health Information Network (DHIN)

Established in 2007 and recognized as the first operational statewide HIE in the nation, the Delaware Health Information Network (DHIN) includes Delaware as well as three sites in Maryland. It's been fully self-sustainable since 2012, and provides on-demand access to current and previous medical results. It also exchanges hospital and ED discharge information with CRISP.



OBJECTIVE

Union Hospital sought to more effectively manage important clinical information, in order to better serve patients moving between multiple states for treatment. Better access to information would improve communication — enabling Union Hospital to offer higher quality care to their patients, as well as more efficient and cost-effective workflows for physicians.

STREAMLINING PROVIDER WORKFLOW

Union Hospital shares clinical information such as lab results, procedures, transcription reports, imaging, summaries of care, and other specialty-related results from cardiology, pathology, and endoscopy through their use of both HIEs. By directly integrating information into the MEDITECH workflow, Union Hospital providers have increased their efficiency through ease of access. In addition, providers can view any patient's clinical information within the region, in real time using embedded portal access.

Within the Discharge Routine, clinicians with a direct email address in the system associated with the patient will automatically receive CCDs to their EMR. CCDs are sent to CRISP for all discharged inpatients and observation patients.

In addition, summaries of care are received from employed clinicians, such as practices using a different EHR, and other ambulatory practices. These documents contain key elements, including the patient's primary care provider, care program, and any care alerts. This information can be used to populate the HIE for other clinicians, route documents based on rules, and autosubscribe practices for Encounter Notification Service (ENS) alerts. ENS alerts are event notifications sent to providers/payers whenever a patient is admitted, discharged, and transferred from the hospital or ED.

⁾ IMPROVING PATIENT EXPERIENCE WITH INFORMED, COORDINATED CARE

Ensuring clinicians have online access to patient medical histories enables patients to experience a more "frictionless" experience — as they are no longer required to recall previous medical events, complicated medication names, and general information that clinicians can easily review by accessing their history.

Additionally, when clinicians receive notifications regarding care their patients have received throughout the region, they can follow-up in a more timely manner and be proactive with their care coordination. Through the DHIN, patients can also receive consumer SMS alerts on their smartphones from MEDITECH when there is new activity within the Community Health Record. MEDITECH's EHR contributes to this record providing patients with on-demand access to lab results, allergies, physician documentation, and other vitals.



SAVING TIME TO BENEFIT BOTH PHYSICIANS AND PATIENTS

By sharing information with the CRISP and DHIN HIEs and embedding it into physician workflow, both physicians and patients experience significant time savings. Physicians benefit from one hour less of paperwork per day, which enables them to spend more quality time with patients. At the same time, patients are spending more time with physicians talking about their care and less time repeating tests and waiting for films.

Preventing patients from paying for redundant tests helps them save money as well, especially if their health

plan includes high deductibles. Clinicians can also make faster, more informed decisions regarding patient transfers, thereby expediting care delivery and allowing for better care coordination.

SAVING MONEY TO SUPPORT VALUE-BASED CARE

Beyond saving patients money, fewer redundant tests supports value-based care by saving hospitals money, time, and resources. Leveraging information from the CRISP and DHIN HIEs saved the hospital money on implementing and supporting interfaces as well. In general, Union Hospital is reducing their interfaces with EHRs in an effort to focus on sharing information through the HIEs.

REAPING THE BENEFITS

Leveraging the state health information exchanges, Union Hospital is improving care delivery by giving clinicians easy access to information and events occurring across a variety of care settings and locations. Embedding access to clinical summaries, clinical health portals, and alerts allows physicians to have a more efficient workflow, thereby enhancing both the physician and patient experiences. With one hour less of daily paperwork to do, physicians can spend more time with their patients, making sure they understand their conditions and the steps they need to take to maintain or improve their health.

Sharing information also reduces costs for patients and the hospital by eliminating the need for redundant testing and decreasing the need for interfaces to share information.

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