CASE STUDY

eClinicalWorks

NORTHWEST COMMUNITY HEALTHCARE MEDICAL GROUP

INTEROPERABILITY: BATTLING INFORMATION ASYMMETRY

improving healthcare together

The Challenge

Northwest Community Healthcare Medical Group is a large multispecialty practice serving thousands of patients in the suburbs northwest of Chicago. NCH Medical Group providers faced a significant challenge with "information asymmetry," and needed a way to transfer records from Northwest Community Healthcare Hospital, which used a different EHR vendor.

The Solution

NCH Medical Group activated the Carequality network for interoperability, one of two nationwide networks that eClinicalWorks has joined. Practitioners largely eliminated the need for transcription services and are now able to obtain the clinical patient data they need on demand and at the point of care.

The Results

Effective interoperability has allowed NCH Medical Group providers to obtain complete medical records prior to each visit, resulting in higher quality patient care. Improved communications and a reduction in "information asymmetry" has both reduced the chances of medical errors and improved the care planning process throughout the NCH system.

eClinicalWorks

Northwest Community Healthcare Medical Group

Interoperability: Battling Information Asymmetry

Sorting Data in the Age of the EHR

A generation ago, Electronic Health Records didn't exist. Even 20 years ago, they remained in their infancy. Today, more than 90% of medical practices in the U.S. are working on electronic databases.[1] Unless they probe the history of medicine or watch old medical docudramas, the next generation of medical professionals will never know what the world was like in the days before the EHR.

But one thing that doctors will be wrestling with for some time to come is finding a way to get all the data in those EHR systems to play nicely together.

It's one thing to document cases, write prescriptions, and compile reams of data on the health of individuals and populations. But sifting through all that information for what's truly meaningful — even capable of saving a life — and making it available to providers quickly and at the point of care? That can still be a challenge. As late as 2016, the medical press was full of news about the obstacles and barriers to effective interoperability. No less than Steven J. Stack, M.D., president of the American Medical Association, told "Medical Economics" that "records have not been as portable as people had hoped they would be."[2]

Indeed, there is strong evidence that patients, while still concerned that their data be protected, expect their providers to have their information and expect it to be complete and accurate.

One survey, conducted by "Software Advice," found that nearly three-quarters of patients are comfortable with their Personal Health Information being "immediately accessible online by any authorized health care provider in their state."[3]

1   https://dashboard.healthit.gov/quickstats/quickstats.php
2   http://medicaleconomics.modernmedicine.com/medical-economics/news/lingering-challenge-healthcare-interoperability
3   http://www.softwareadvice.com/resources/address-ehr-interoperability-concerns/

A View From Chicago

> " It is very easy to use in the workflow since I don't have to transition out of our Electronic Medical Record and go into a different EMR. It seamlessly integrates into eClinicalWorks at the point of care. When the patient checks in, and once they are sitting in front of me, I can easily bring up all that information in the Right Chart Panel within eClinicalWorks, and evaluation all of the data that's necessary for the patient's care. "

— Dr. Ghanshyam M. Shah
Internist at Northwest Community
Healthcare Medical Group

Dr. Ghanshyam M. Shah, an internist at Northwest Community Healthcare (NCH) Medical Group in suburban Chicago, is also medical director of IT at Northwest Community Hospital in Arlington Heights, Illinois.

Dr. Shah understands the obstacles that effective interoperability must overcome. With his medical group on eClinicalWorks and the hospital on Epic, Dr. Shah said there was a "significant information asymmetry" facing patients and the physicians trying to treat them.

"Because a majority of our patients go to our local hospital, which has Epic," Dr. Shah said, "a lot of the information that resides within eClinicalWorks — whether it's their medical history, surgical history, medications, or allergies — was not necessarily available to them."

Every time a patient would come out of the hospital, information had to be exchanged, with the ever-present dangers of transcription errors and the omission of information from providers who might not be connected to other providers.

Fortunately for Dr. Shah, NCH, and medical practices nationwide, our age of information overload is also an age of improving interoperability.

The Push for Interoperability

Two years ago, the Office of the National Coordinator for Health Information Technology released a 166-page report, "Connecting Health and Care for the Nation: A Shared Interoperability Roadmap," which emphasized the critical role that interoperability must play if the nation is to achieve the often-discussed "triple aim" of improving patient outcomes, improving healthcare quality, and lowering costs.[4]

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4   https://www.healthit.gov/sites/default/files/nationwide-interoperability-roadmap-draft-version-1.0.pdf

The NCHIT report offers a blueprint for where healthcare interoperability should go next. However, even as it was being drafted, industry forces were rising to the challenge with the creation of two nationwide interoperability frameworks, CommonWell and Carequality. eClinicalWorks has been an active participant in both, thereby maximizing the opportunities for data exchange for our clients.

"Traditionally, with standard interfaces, every time a practice wants to connect with another EMR — whether at a hospital or Health Information Exchange — the setup has always been point to point," explained Farah Saeed, a member of the Interoperability team at eClinicalWorks. "The great thing about these organizations is that it's really just one connection. They serve as middlemen. By connecting just one time to either or both, a practice can leverage everyone else who is also participating."

Improving Workflows at NCH
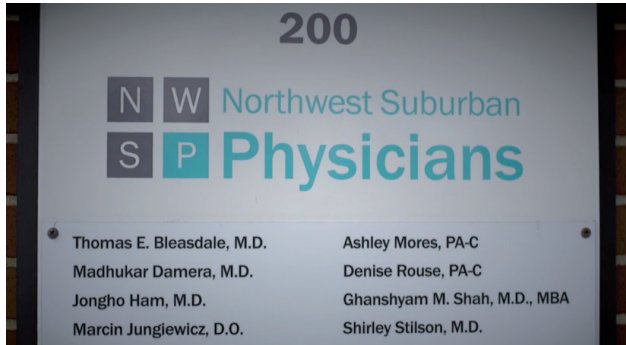
NCH quickly signed on to Carequality, and providers have noticed an immediate difference.

"It is very easy to use in the workflow since I don't have to transition out of our Electronic Medical Record and go into a different EMR," Dr. Shah said. "It seamlessly integrates into eClinicalWorks at the point of care. When the patient checks in, and once they are sitting in front of me, I can easily bring up all that information in the Right Chart Panel within eClinicalWorks, and evaluate all of the data that's necessary for the patient's care."

"For years the patients have said, 'Well, isn't that all in the computer?' and it hasn't been," says Dr. Catherine M. Wood, a colleague of Dr. Shah's at NCH. "Instead, it has been log out of this system, log into another one. Now I can see it in one system, without having to toggle back and forth."

Dr. Wood illustrates how interoperability is improving her daily routine.

"Let's say they have just been discharged from the hospital," she said. "You're opening up their chart, and you're going to go through a lot of questions with them. It used to be that that transition of care included whatever the patient remembered or could bring you in paper charts, or what you might be able to get by logging into the hospital system. Now, when they come see us, I can pull up their chart, and on the right-hand screen I can scroll over and link to the hospital system and see the meds they were prescribed, any labs, and some documentation from the hospital as well."

Most practices and providers can be up and running with Carequality and CommonWell in a week or less. To date, over 600 eClinicalWorks customers are linked to Carequality, another 200-plus to CommonWell, and teams are working daily to connect more.

Safety in Numbers

Those numbers matter, and it's not only a matter of convenience.

"Interoperability? We need more and more of it," Dr. Wood adds. "It's what patients expect, and they should expect it because it's what really saves lives and reduces errors. And errors are dangerous in medicine. Communication is everything."

As interoperability continues to grow, Dr. Shah is confident that it will continue to improve patient safety.

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Indeed, with the computing power and connectivity available in healthcare today, there is little reason to expect otherwise.

"Anytime that we can reduce information asymmetry between providers and hospitals it helps with patient care. This is the big goal of an Electronic Medical Record," said Dr. Shah. "Mistakes can happen when patients transition out of the hospital and back into the office and information gets missed. Medication changes, discharge summaries, Progress Notes for the specialty physicians that saw the patient. Diagnostic imaging. All of that information is now available to me."

600 eClinicalWorks
Customers linked

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