

# Leveraging Your Clinical Connectivity Strategy to Evolve with State and National HIEs

Health Connections Brought to Life™

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Healthcare Technology, LabCorp

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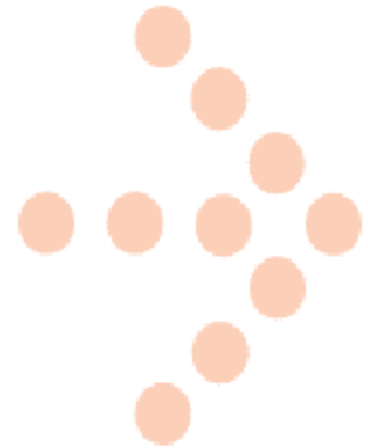
VP of Clinical Solutions, RelayHealth

# Agenda

- Trends & Implications for Hospitals and Affiliated Physicians
- LabCorp Business Case
- Northern California & Northern New Jersey Market Examples

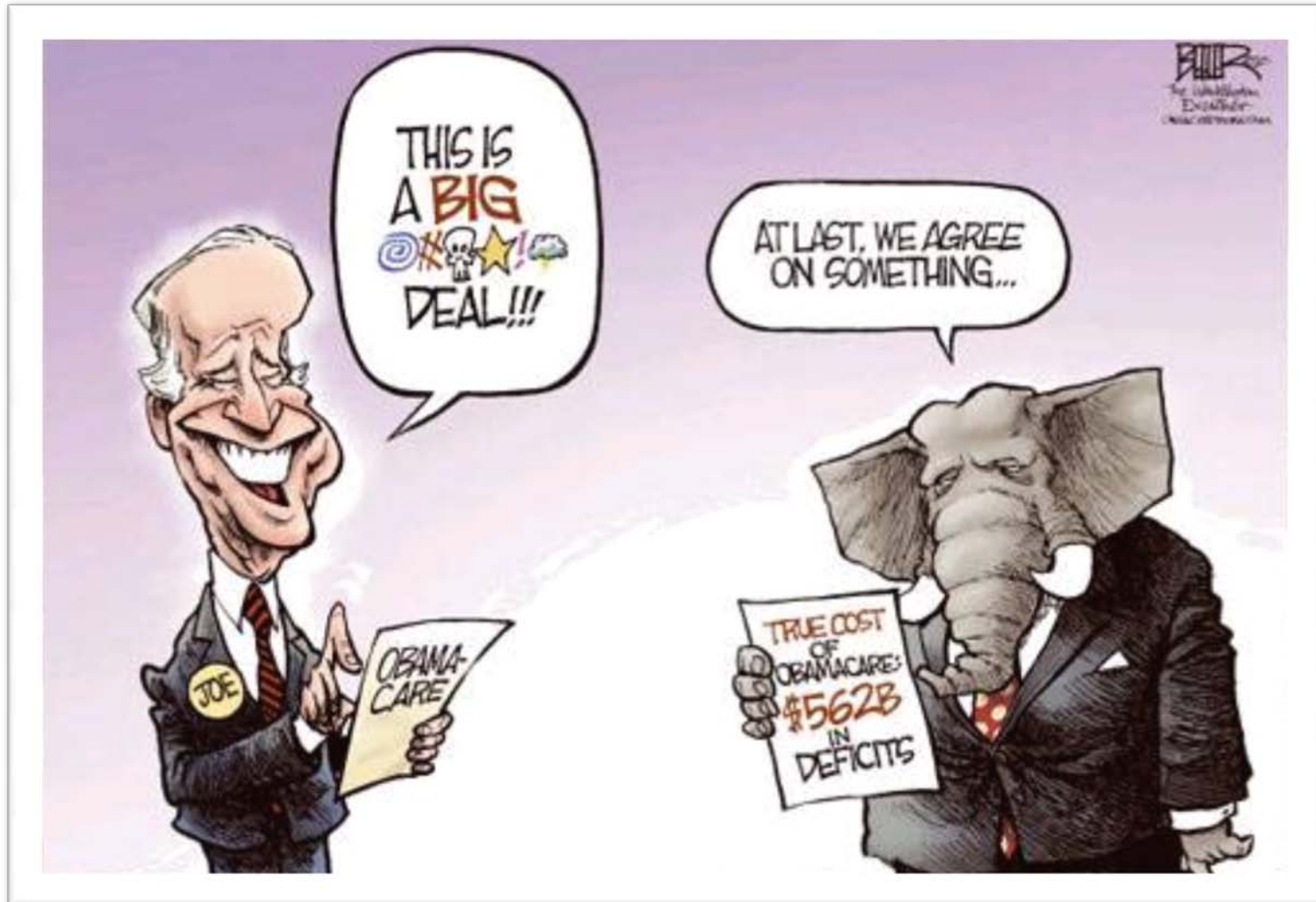


# Trends & Implications for Hospitals and Affiliated Physicians



But ARRA is just the beginning...

*Seismic shifts are included in the reform act*



5/17/2010

# HIE Market Noise

Separating the buzz from reality



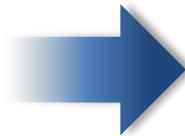
Number of HIE-related News Articles



Source: Google News Archive Search using keyword "health information exchange",  
<http://news.google.com/archivesearch?q=health+information+exchange> accessed April 1, 2010

# Defining HIE

The action of HIE versus governance

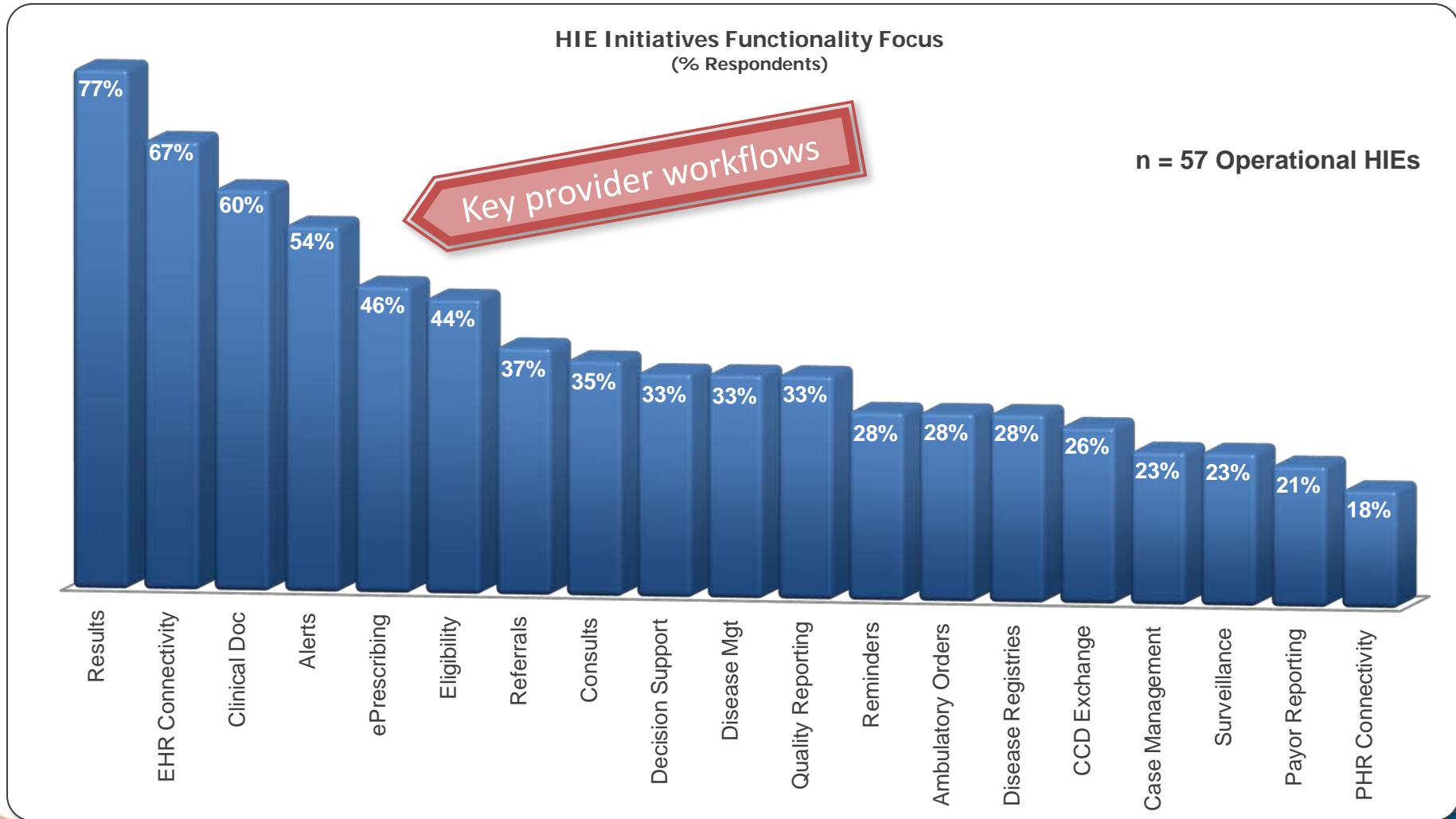


Private HIO	Community HIO	RHIO
Local	Community	Statewide
Single non-gov't organization	Multiple orgs w/in geography	Owned or led by state gov't
Focus on clinical integration of workflows across care continuum	Focus on sharing patient info for workflows across the community	Focus on broad, generalized use cases and state public health
Self-sustainable based on value provided to the local health system	Mixed sustainability dependent on value delivered to collaborative	Minimal sustainable model based on lack of value to providers

the act, process or an instance of sharing health information

# The "I" in HIE

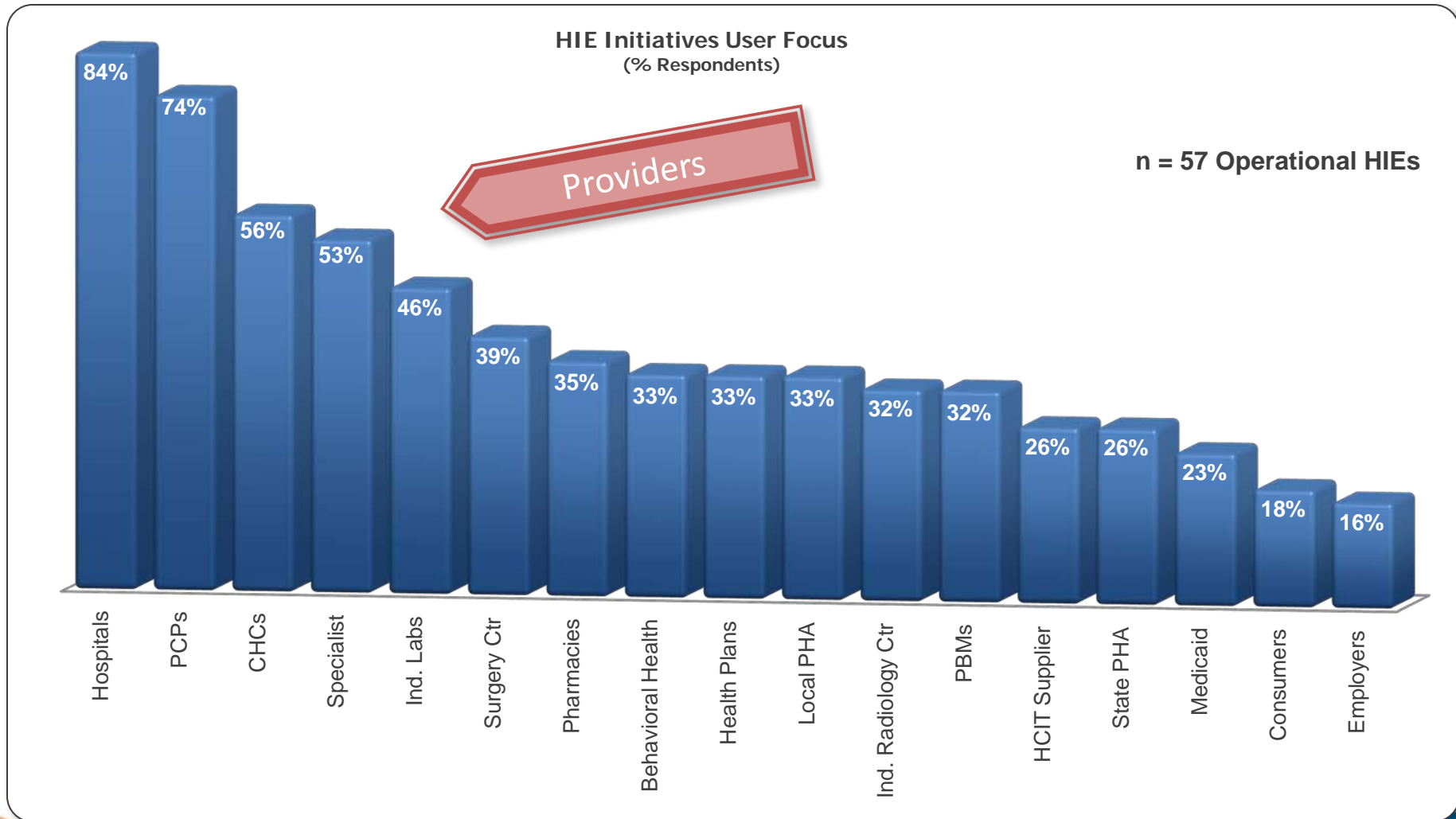
Focus is on supporting key workflows



Source: Results of 2009 Survey on Health Information Exchange:  
© Copyright 2009 eHealth Initiative

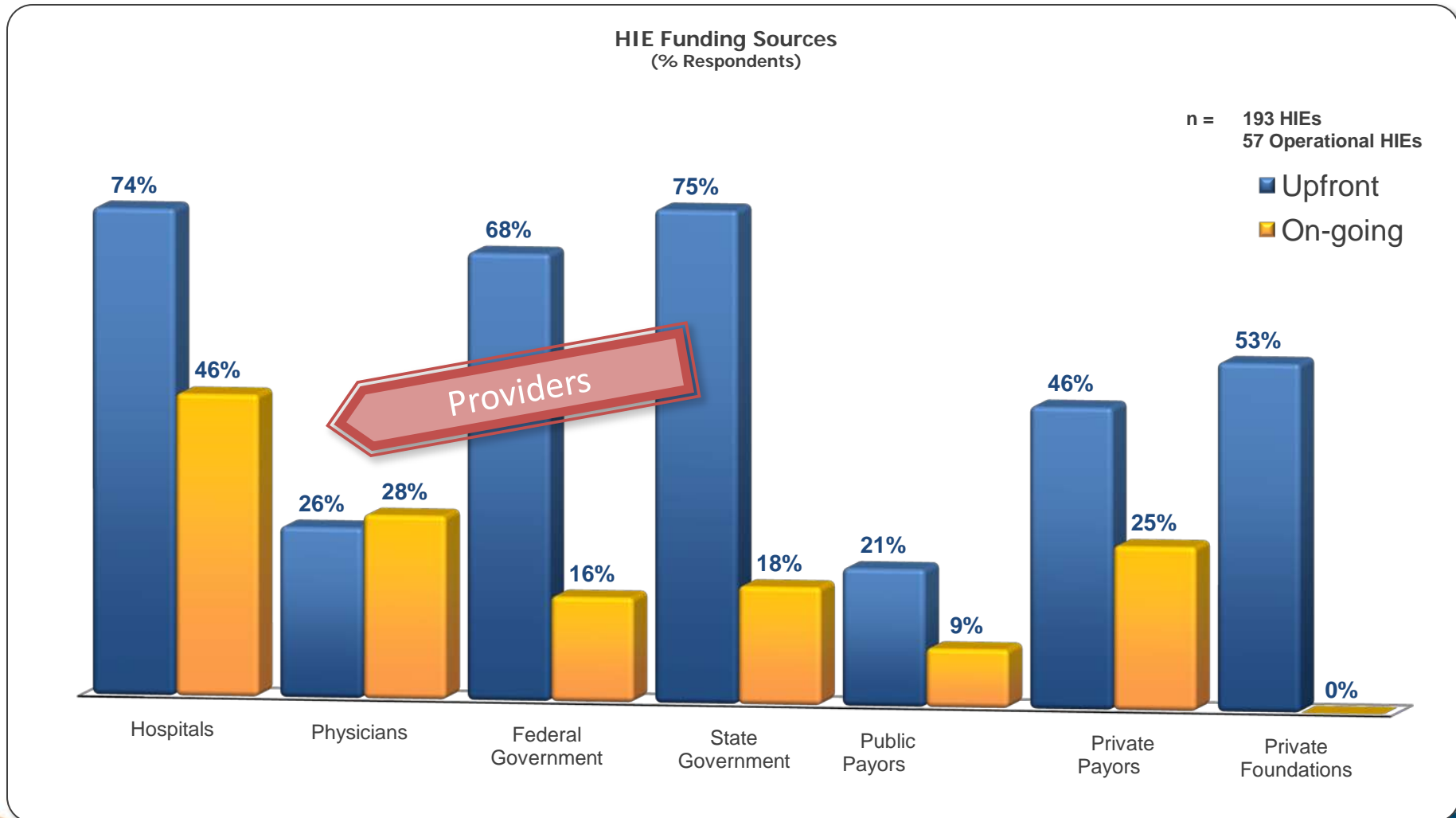
# Who is involved in HIE?

Dominated by providers



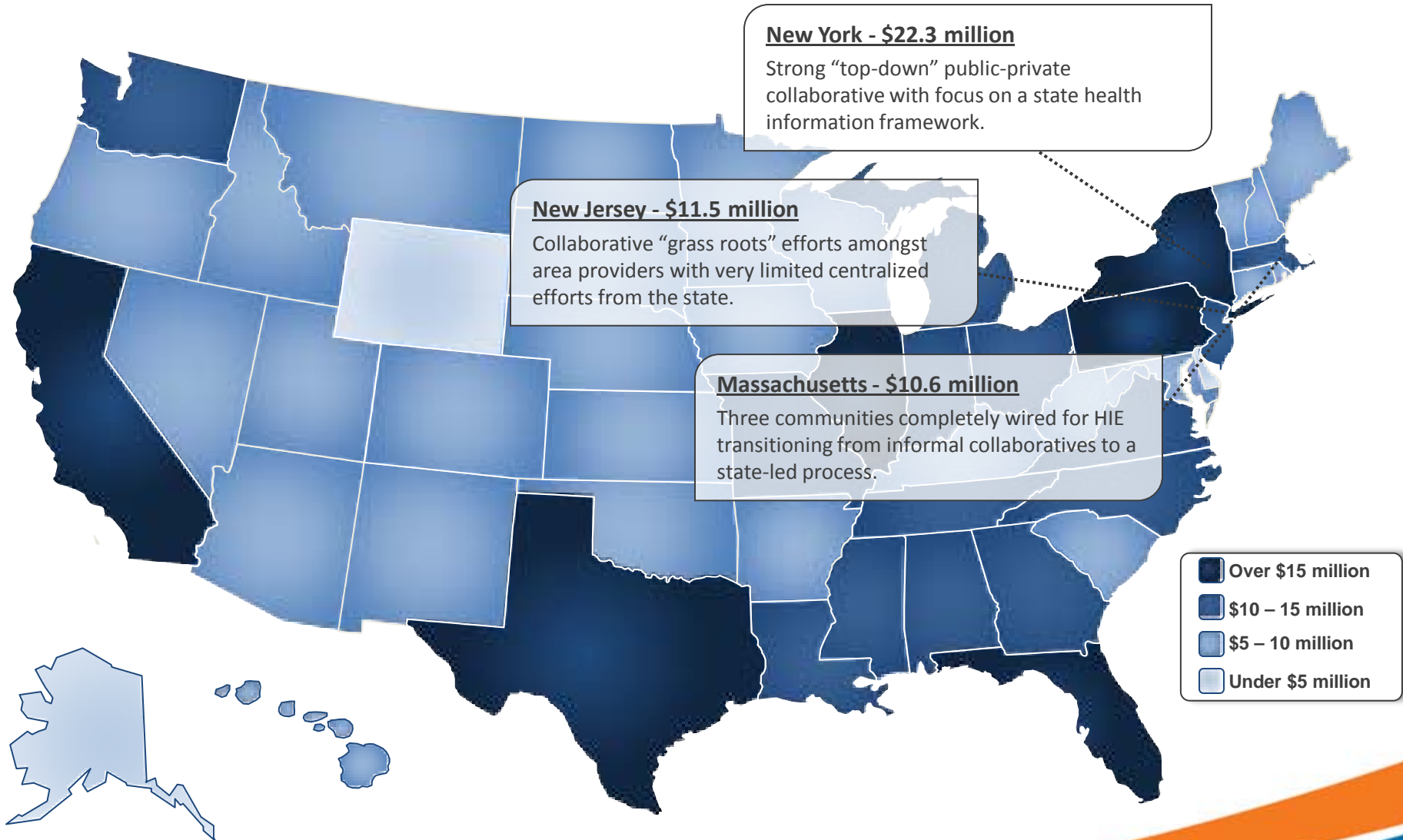
# How is HIE being funded?

Government helps start but providers maintain



# Government Forces

\$547 million worth of confusion



# Time for Change is Now

Health systems must shift to be leaders



## Yesterday

Disparate systems sufficient

Electronic exchange is a “cost”

Independent physicians and other non-acute providers

PHR is for differentiation

Disengaged patient



## Tomorrow

Clinical integration necessary

Exchange lowers costs

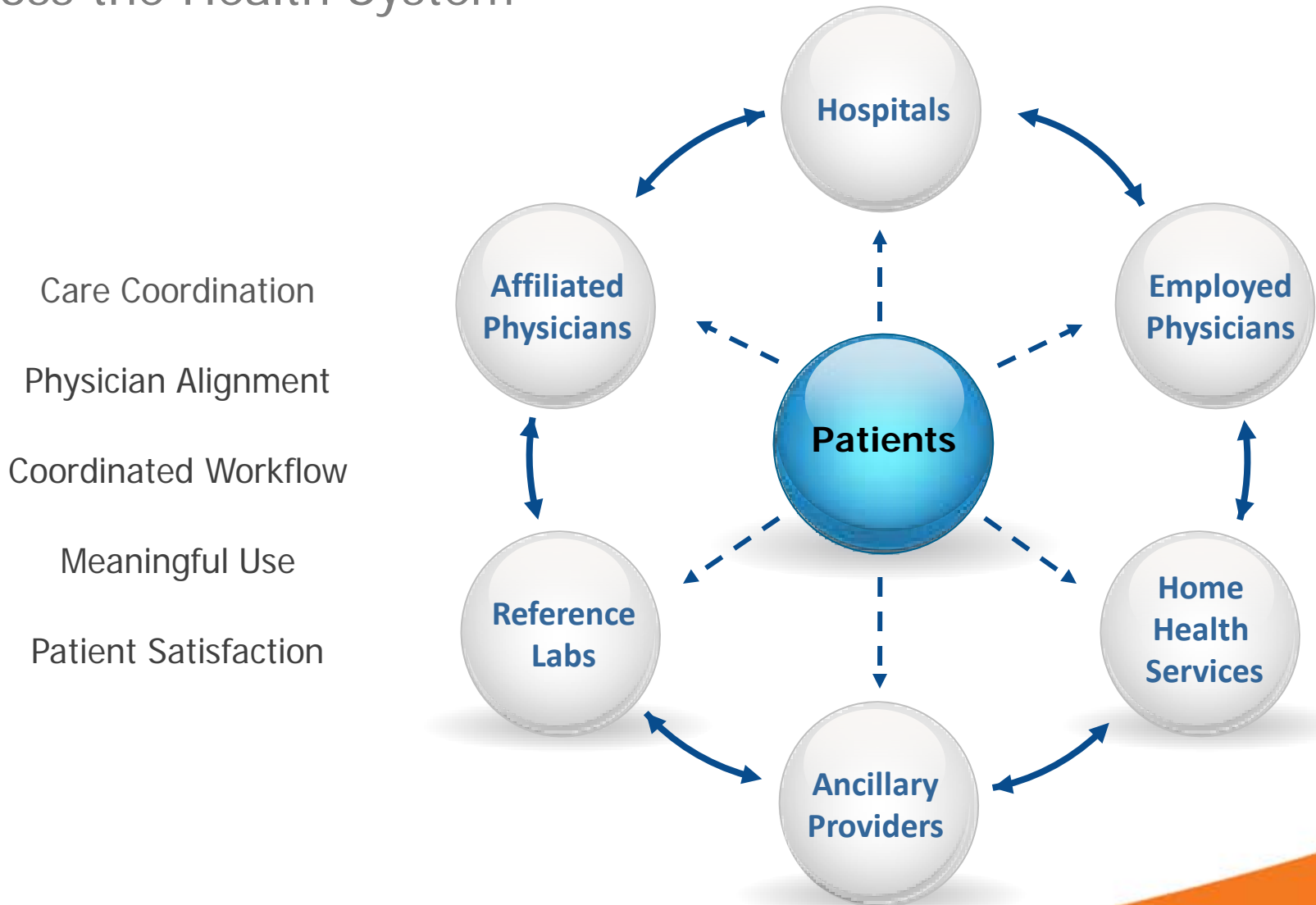
Tightly aligned / employed physicians and other providers

PHR critical to self-management

Patient integral to care plan

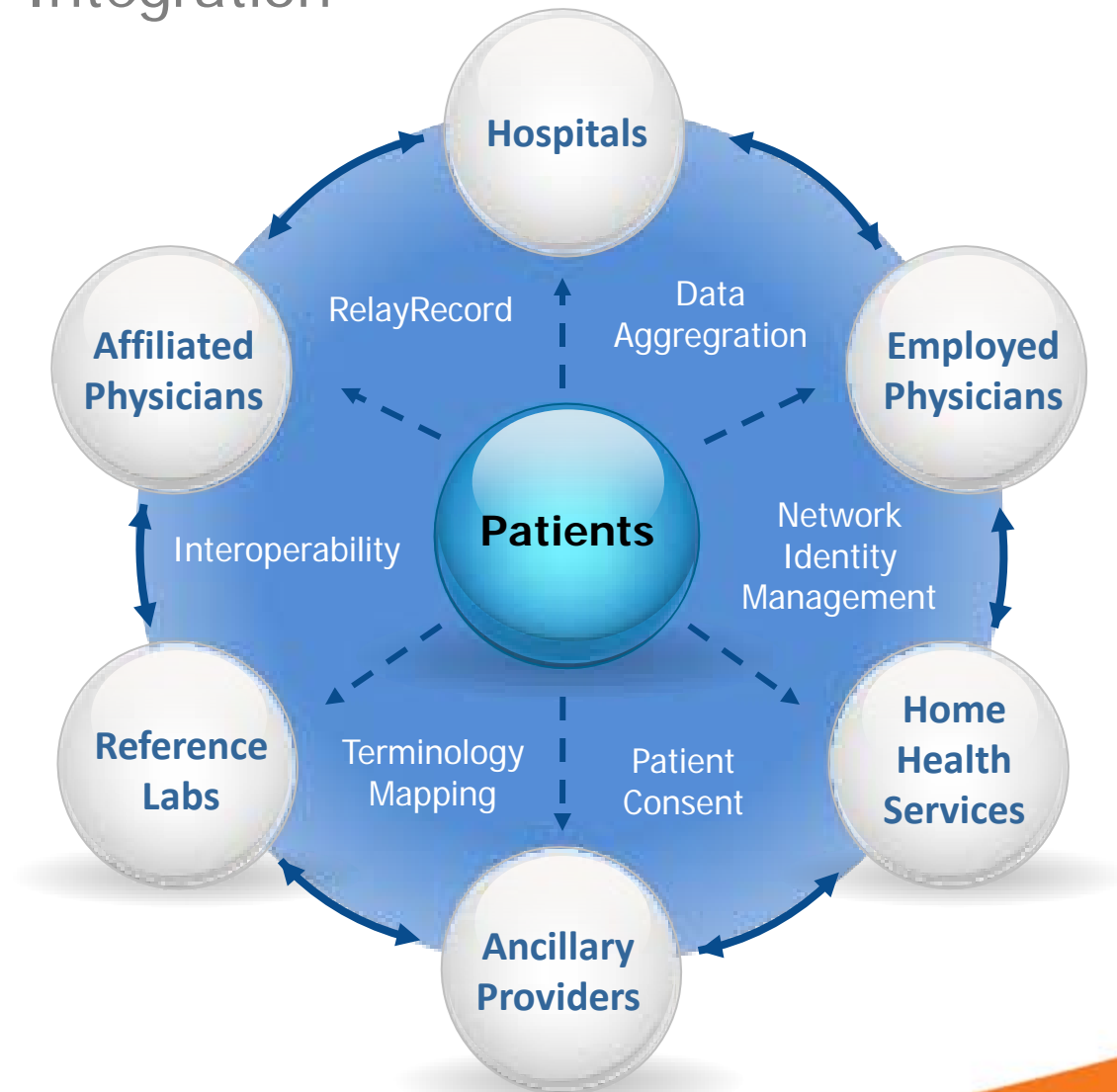
IHO • EHR • Meaningful Use • Eligible Provider • HI  
Patient-Centered Medical Home • Clinical Groupware • H  
• ACO • Interoperability • ARRA • Eligible Hospital • HI  
Clinical Groupware • NHIN • CCD • Accountable C  
Organization • Interoperability • NHIN Connect • EH  
Meaningful Use • HL7 • Eligible Provider • HIE • RHIO  
.Home • Eligible Hospital • ARRA • HIE • Meaningful Us  
Patient-Centered • **Clinical Integration** • Clinical Groupw  
• EHR • ARRA • HIE • Interoperability • ARRA • HL  
Eligible Provider • Patient-Centered Medical Home  
Interoperability • RHIO • ACO • Interoperability • ARRA  
Eligible Hospital • IHO • Accountable Care Organization  
CCD • NHIN Direct • EHR • Meaningful Use • Eligi  
Provider • HIE • Patient-Centered Medical Home • RHIO  
ACO • HL7 • ARRA • Eligible Hospital • Clinical Groupwa  
NHIN • RHIO • Accountable Care Organization

# Value of Clinical Integration Across the Health System

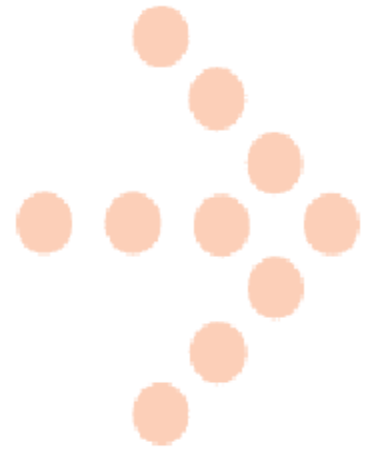


# The RelayPlatform

Enabling Clinical Integration



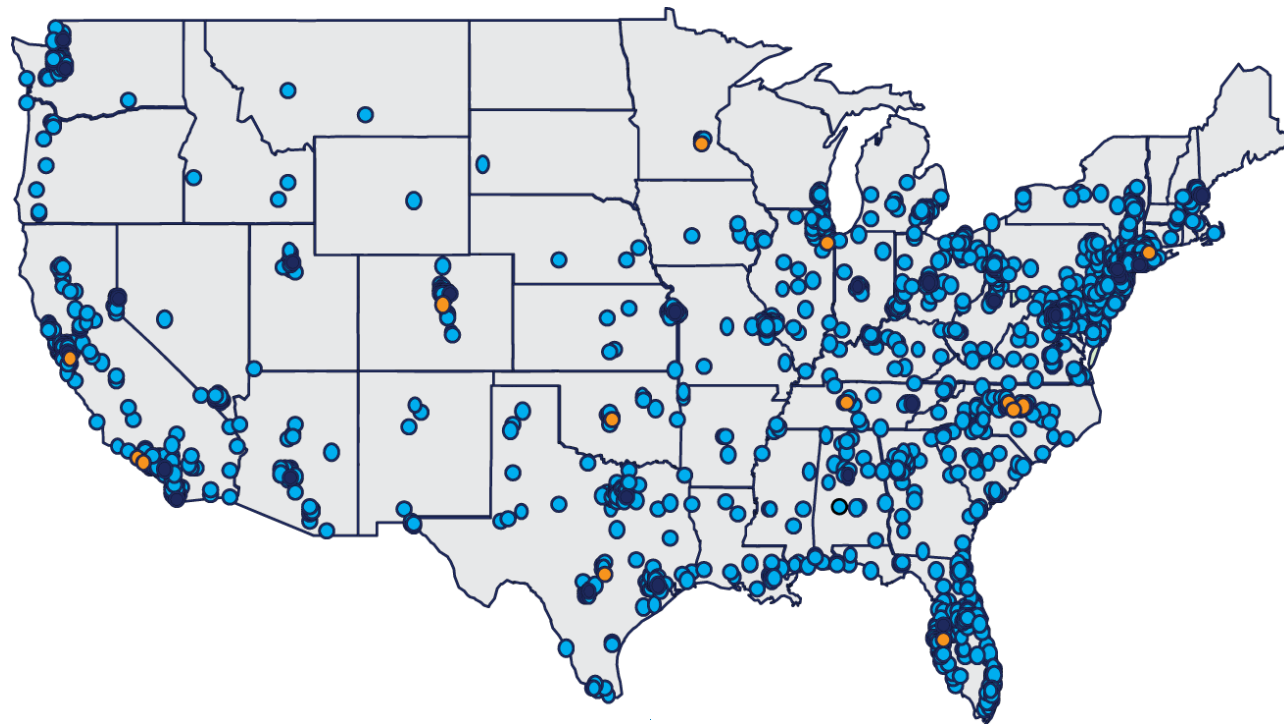
# LabCorp Business Case



# LabCorp National Footprint

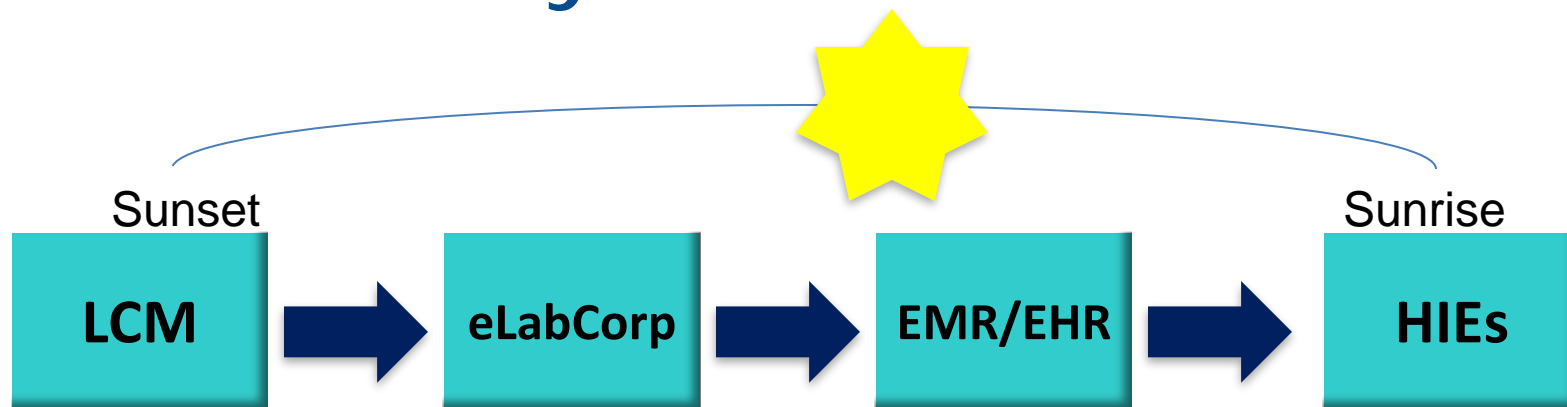
## Size and Scope

- National infrastructure
  - 1600+ Patient Service Centers
  - 6500+ Phlebotomists
  - 2600 Couriers
  - 1000 Sales Reps
  - 700 MDs & PHDs
- Expansive routine and esoteric testing menu
  - Standardized platforms
- Superior managed care footprint



- Patient Service Centers
- Primary LabCorp Testing Locations
- Esoteric testing facilities  
(CET, CMBP, Dianon, Esoterix, NGI, OTS, Viromed)

# Connectivity Evolution



- Fat Client
- Proprietary tool
- Dial up and DSL
- Stable & mature
- Bi-directional
- Web “challenged” markets
- Expensive to support and update

- Web based
- Proprietary tool
- Limited integration:
  - SSO
- Bi-directional
- Much easier to support and update

- 20% by volume
- Manual EDI interface
- Limited bi-directional
- Neutral vendor

- Technology and financial challenges
- Regulatory issues – HIPAA/CLIA
- Neutral vendor
- Opportunity for one to many interfaces
- Regional v State V National

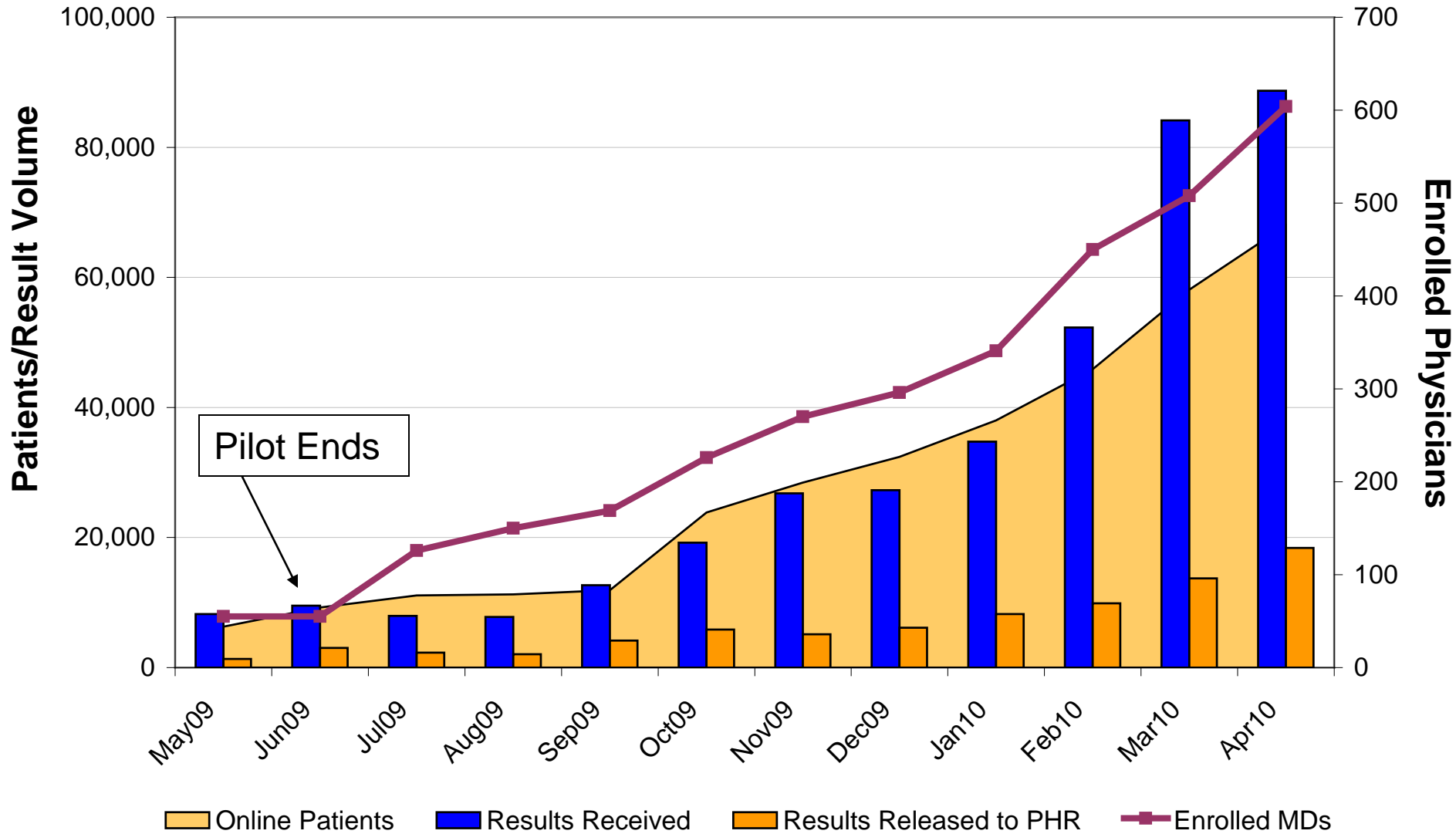
ARRA and Meaningful Use

# Successful EHR/HIE Lab Solutions



- Must be able to deliver Report of Record functionality – Orders and Results
- Common SLAs among Lab Vendors supported  
Common Order Entry, EMR/EHR interfacing and web-portal option
- Meaningful Use certified

# LabCorp Utilization Statistics Through April 30, 2010



# Value to the Practice

- Makes sharing lab results easier
  - Done securely and electronically
  - Requires less time to send out results
  - Saves money on postage
  - Can choose between manual and automatic
- Builds online patient panel
  - Can be used to communicate out time sensitive information
- Robust Customer Support

# Value to LabCorp

- Provides LabCorp a physician-patient solution
  - Patient messaging with a smooth PHR link
- Enables LabCorp sales team to generate additional leads from practices
  - Value of PHR capability
  - Value to electronically share PHRs with other docs
  - Opportunity for LabCorp to be seen as “partner” to providers looking for “certified” solution
- RelayHealth Customer Support manages all service issues
- Builds positive brand awareness with patients
  - “I want electronic copies of my results—please use LabCorp”

# Product Differentiation

- Customer Support
  - RelayHealth has 24/7 support for patients with questions, with other services, patients are calling practices
- Patient Messaging
  - RelayHealth has it, competitors are only able to post results
- Release/AutoRelease
  - Practices are able to post to PHR for offline patients so that when they join the service, lab history is already present
- Usability for patients
  - Viewing results through Google/MSHealthVault is tenuous-signup is an elaborate, multistep process that confuses patients

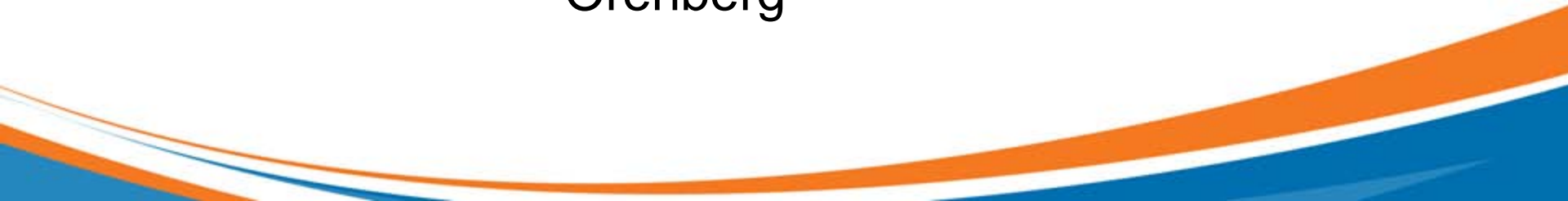
# Practice Feedback

“We automatically release all of our results and have received many compliments about the new service...patients love getting their lab results electronically... and we’ve had no noticeable increase in patient phone calls.”

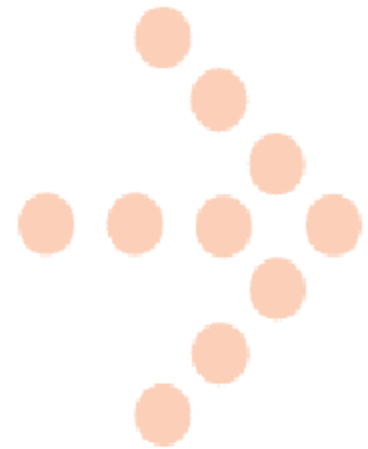
--Bonnie Dzyak, Medical Assistant for Dr David Widman

“I save at least an hour a day using Results Manager to send out lab results to patients...I wish all my results came from LabCorp”

--Dr Scott Orenberg, Wallen, Jacobson and Orenberg

A decorative graphic at the bottom of the slide consisting of a blue wave shape with an orange border.

# Northern California



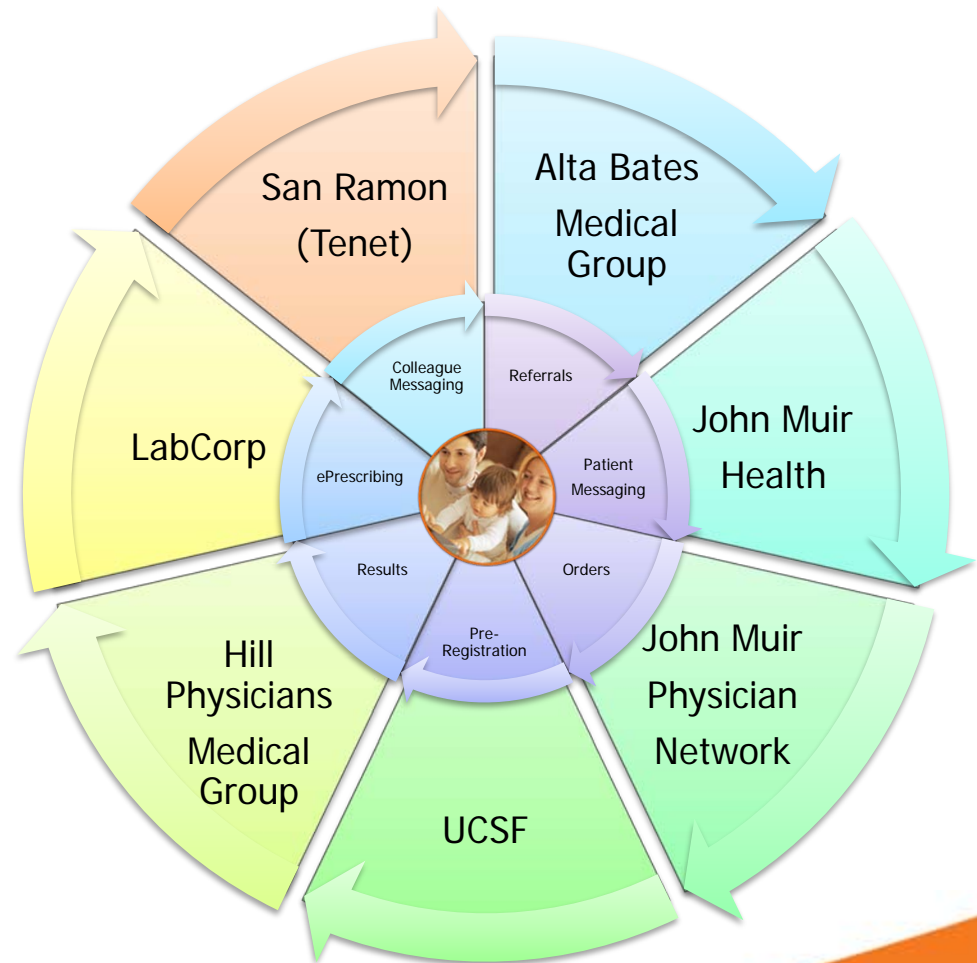
# Regional Collaboration

## The Northern California Market



Six health organizations collaborating in the SF Bay area

- Over 2,800 Physicians participating
- Over 950,000 patients
- 150,000 patient have connected online to their record
- Providers and Hospitals exchanging **2.3M** Transactions in 2009
- Reference labs
- Patients with coordinated care
- Interoperability with 5 different vendors (Cerner, GE, NextGen, McKesson, Dynamic Business Solutions)



# Northern New Jersey



# Regional Collaboration

Northern and Central Jersey



Northern & Central New Jersey  
Health Information Exchange  
Collaborative

## Grant Proposal

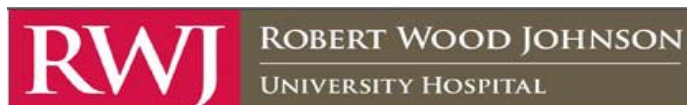


Prepared for the State of New  
Jersey, Office of e-HIT  
September 25, 2009

 **SAINT BARNABAS  
HEALTH CARE SYSTEM**



 **Trinitas Regional Medical Center**



 **CATHOLIC HEALTH  
INITIATIVES®**

**Saint Clare's Health System**

# Regional HIE Collaboration

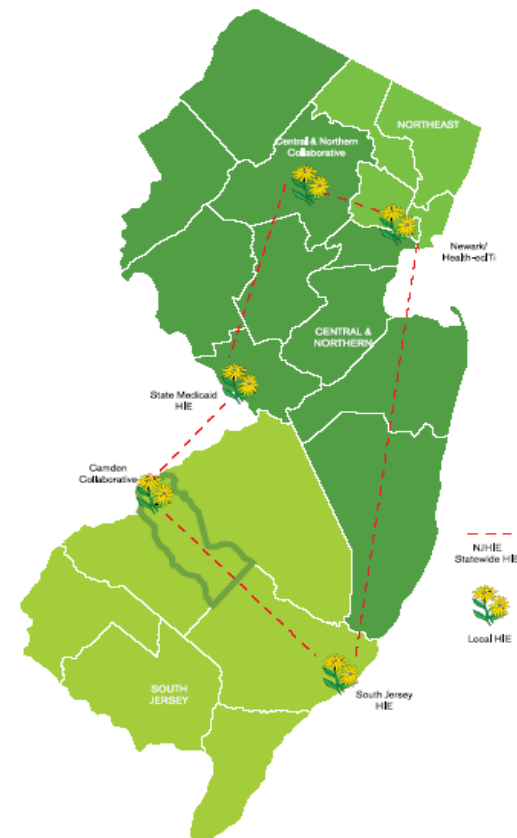
## Northern and Central New Jersey Market



### Six Health Systems are RelayHealth Customers Anchoring the Collaborative

- Part of a state-wide HIE initiative
- Over 700 connected physicians
- Over 385,000 connected patient records
- More than 25,000 actively connected patients
- Over 10,000 electronic prescriptions/month
- Over 45,000 clinical documents and lab test results transmitted per month

Pictorial View of New Jersey Implementation Strategy - First Phase



# Virtual Information Exchange Strategy

Extending Beyond the Clinically Integrated Health System

