

Health network and IBM team up

THINC meets the company whose motto is Think

BY JIM GORDON
jgordon@westfairinc.com

There are many factors that will make America's health care system as truly modern as some of the machinery it operates. But perhaps no factor is more important than using information technology and electronic health records (EHR) to help medical personnel meet the varied challenges of quality care, cost and privacy that are the daily staples of doctoring.

And on the cutting edge of making IT and EHR a reality is THINC, the Taconic Health Information Network and Community, a not-for-profit corporation that is teaming with IBM to bring online a secure health information network and implement an array of health-improvement activities including public health surveillance, a pilot program of paying physicians for performance and other initiatives.

Their work will encompass hospitals, medical facilities and physicians throughout the Hudson Valley in Westchester, Rockland, Orange, Putnam, Sullivan, Ulster, Dutchess and Delaware counties. Affiliated organizations include the Stellaris Health System hospitals in Westchester County to St. Francis Hospital in Poughkeepsie.

Speaking at a June 11 event sponsored by IBM to discuss ways that IT can help solve an array of global challenges, THINC Executive Director Susan Stuard said Big Blue and her group are involved in "a really unique collaboration," in modernizing the delivery of health care using IT.

Key to the concept is creating a "medical home," which she compared to "Marcus Welby with IT tools." The result, she said, would improve patient experience from "Disjointed episodic care to ongoing care coordinated by the primary partner," who would be the patient's primary care physician.

"In many ways, the emphasis is on the Marcus Welby side," Stuard said in a follow up interview, referencing the TV show that featured Robert Young as caring and considerate Dr. Welby. "It means your primary is taking a very strong role in coordinating your care and has infrastructure to enable that."

Creating a medical home "must be coupled with reform of how physicians are compensated for doing care coordination, which is not currently reimbursable," said Stuard. Under current compensation models, a primary care physician "doesn't get paid" to coordinate health care.

"IBM has come to the table as an employer who pays health insurance," said Stuard, and said IBM's participation has helped make THINC program the second-largest medical

home pilot project in the country. There are currently 210 primary care physicians in the Hudson Valley participating in the program and six health insurance companies joining forces to create a model where performance based reimbursement and payment for coordinating care are a reality.

She said having six insurance companies involved is key, because it creates a viable critical mass of medical consumers for the program. She said the pilot project provided a chance for "robust evaluation" of various initiatives that will "inform the national policy agenda" for improving health care.

Bringing IT to health care is "The granddaddy of them all in terms of complexity and waste," said said Senior Vice President and Director of IBM Research Dr. John E. Kelly III at the June 11 event. Kelly said that the American health care system has the technical capability for interconnectivity, but said there is no agreed-upon model to connect all the information into a universally useful and accessible format.

"We've got to connect this system," said Kelly. "Its one of the grand challenges" of reforming our health care system.

THINC started as a formal project in 2005, developing out of discussions among regional medical professionals about the need to upgrade medical IT and create EHR locally. A nonprofit and neutral organization was deemed necessary to provide the grease between facilities that sometimes compete for patients.

Stuard said that ensuring medical privacy is a key concern. "If you don't get the privacy aspect right, consumer won't buy in," she said. The state Department of Health has set "a very high standard" for handling patient medical records in an EHR format, including getting "affirmative consent" from patients to share their medical records as necessary with medical professionals, and a requirement that records are accessed only on a need-to-know basis. To ensure conformity, there will be an audit trail that will enable patients, upon request, to check who has accessed their records and THINC will also perform audits of who is accessing records to ensure compliance with privacy provisions.

"We take the privacy issues very seriously and have to remain vigilant on it," said Stuard.

She said the first EHR components of the THINC network will "go live" in late 2009 and early 2010 and be ramped up from there. She envisions a five- to 10-year process of linking the doctors and medical facilities of the Hudson Valley but said that if Medicaid and Medicare utilize the concept "that could spur things much more quickly."