

# DHA: Addressing Health Disparities through Health Information Technology

DELTA HEALTH ALLIANCE



# Presenter Disclosures

**(1) The following personal financial relationships with commercial interests relevant to this presentation existed during the past 12 months:**

**“No relationships to disclose”**



# Presenter Disclosures

Anna Lyn Whitt  
Theresa Hill

**(2) My presentation will include discussion of “off-label” use of the following:**

AllScripts Touchworks Electronic Health Records



A faint map of Alabama counties is visible in the background of the slide. The map shows various counties such as DeSoto, Tallapoosa, Limestone, and others, though they are not clearly labeled in this view.

# EHR's Impact on Healthcare Delivery

- Better Medication Management
- Improved process of care measures
  - Timely and appropriate exams, lab testing
- Greater patient satisfaction
- Enhanced diabetes-related outcomes
- Increased patient safety
- Improved provider satisfaction
- Reduced costs related to care

# *What we have done*



Over 946,000

*The number of individuals whose health records are stored in our EHR database.*

# *What we have done*



472

***The number of health care professionals who use the DHA Electronic Health Records system.***



# *What we have done*



5

***Number of Delta hospitals that have telemedicine capabilities in their emergency rooms connected to UMMC's emergency room.***

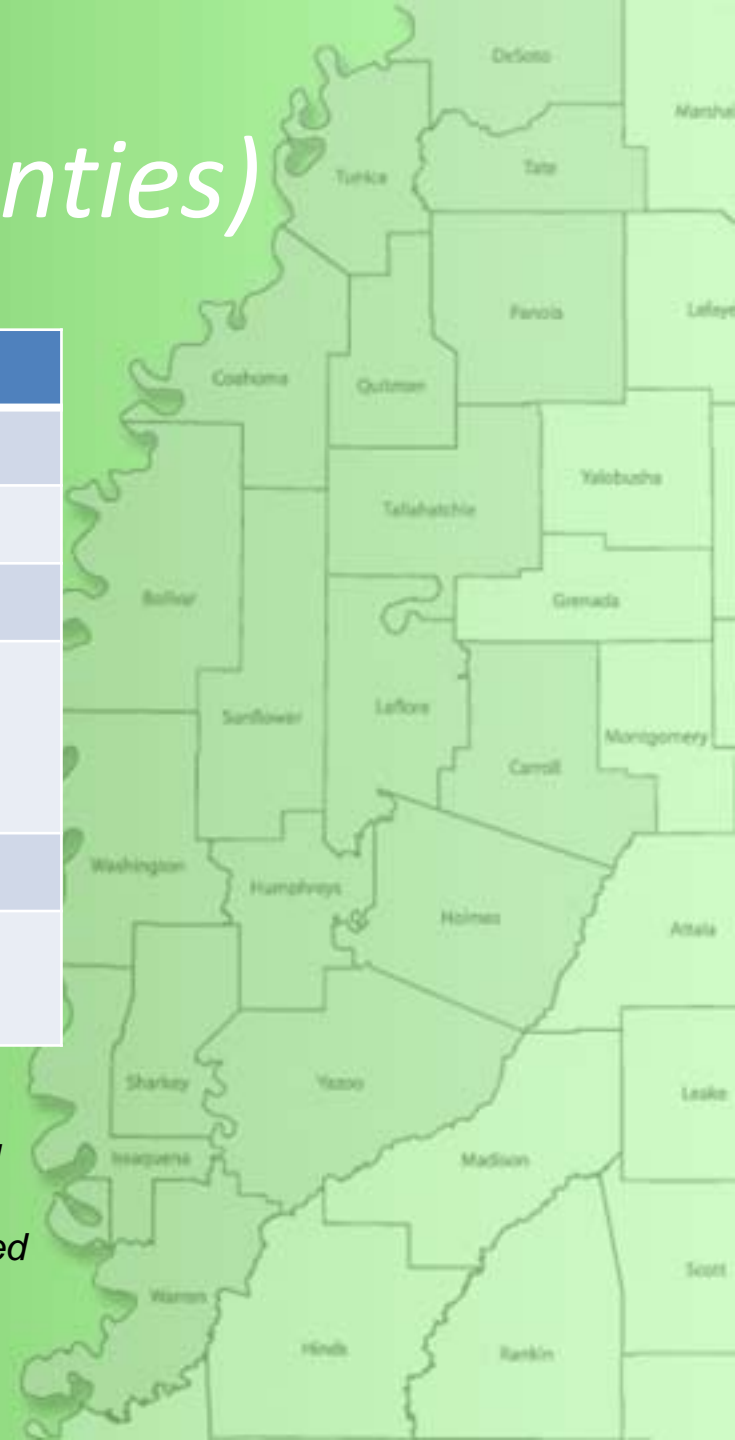


# Access To Care (12 counties)

Total Number of . . .	
Direct <u>people</u> served	<b>185,806</b>
Indirect people served	277,675
Duplicated encounters	1,523,065
<u>People</u> in a target population with access to new/expanded programs/services	946,989
<u>People</u> in target population	560,115
New and/or expanded <u>services</u> provided	252

*Total Unduplicated Encounters is the number of unique individual users who have received documented services.*

*Total Encounters are the number of documented services provided to all individuals.*







# Electronic Health Records Networks

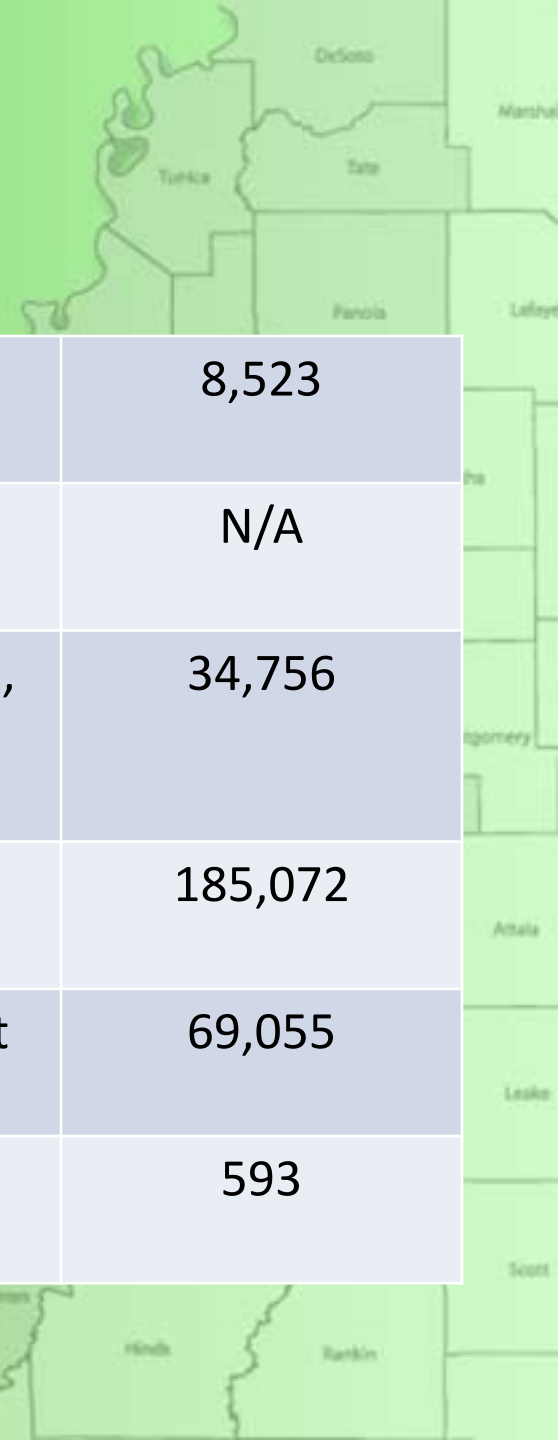
Number of Organizations 33

- Rural Heal Clinics
- Free Clinics
- Community Health Centers
- University/College
- School District
- Physician/Nurse Practitioner free standing clinics





# Electronic Health Records Underinsured/Uninsured

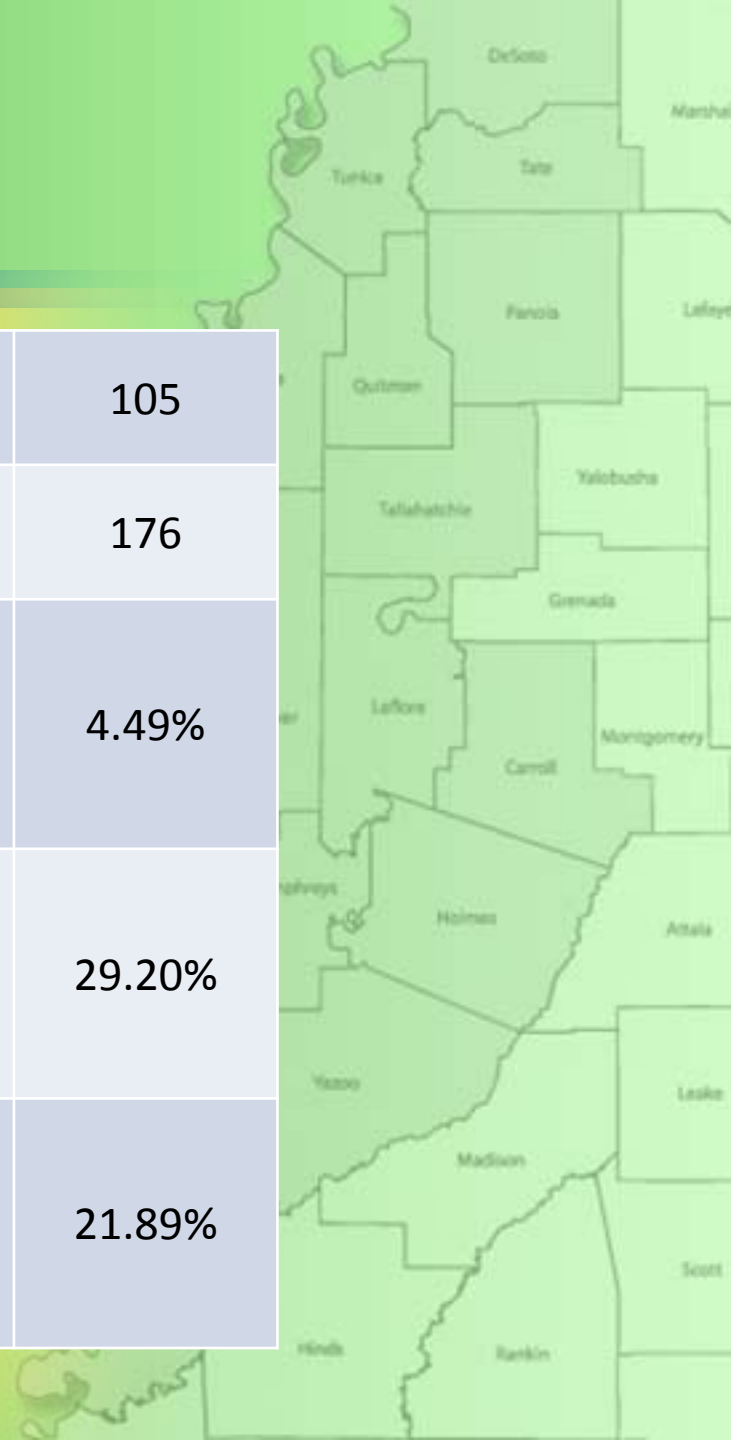


People receiving preventive and/or primary care	8,523
People who have a medical home	N/A
People enrolled for public assistance (Medicaid, Medicare, SCHIP)	34,756
People who paid out-of-pocket for all or part of services	185,072
People who use third-party payments to pay for all or part of the services	69,055
People who receive charity care	593



# Electronic Health Records Measures

Process	Professionals Receiving Education or Training	105
	Health Professionals Receiving Education or Training	176
Clinical	Percent of adult patients with Type 1 or Type 2 diabetes with most recent hemoglobin A1c(HbA1c) greater than 9.0% in the last year (uncontrolled).	4.49%
	Percent of adult patient, 18 years and older, with diagnosed hypertension whose blood pressure was less than 140/90 mm/Hg (adequate control).	29.20%
	Percent of adult patients, 18 years and older, diagnosed with diabetes, whose blood pressure was less than 130/80 mm/Hg (adequate control).	21.89%



# *BLUES Background*

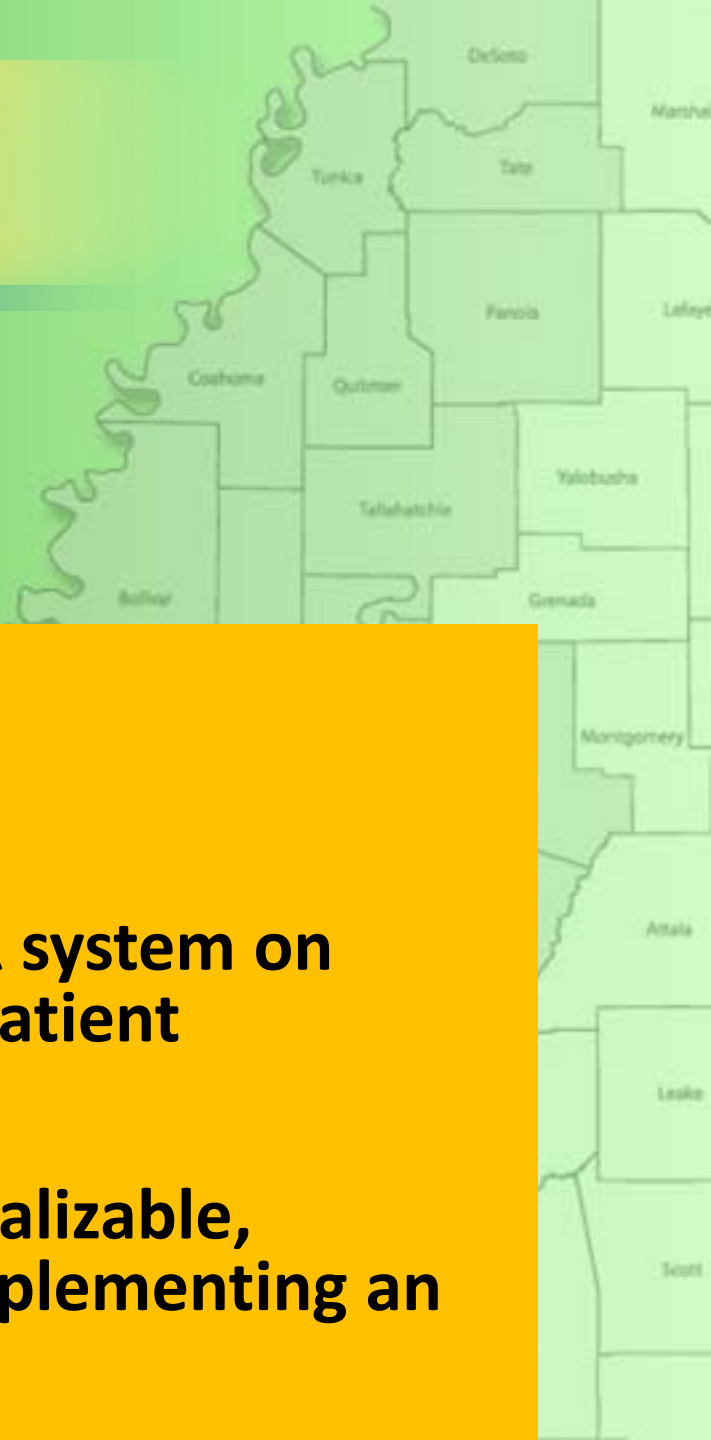
## *Better Living Utilizing Electronic Systems*

### Research Aims

**Successfully implement EHRs**

**Evaluate the impact of the EHR system on clinical processes of care and patient outcomes.**

**Produce and distribute a generalizable, replicable model of care for implementing an integrated health IT system**



# Data Collection: Evaluation Measures & Instruments

## Clinical patient data

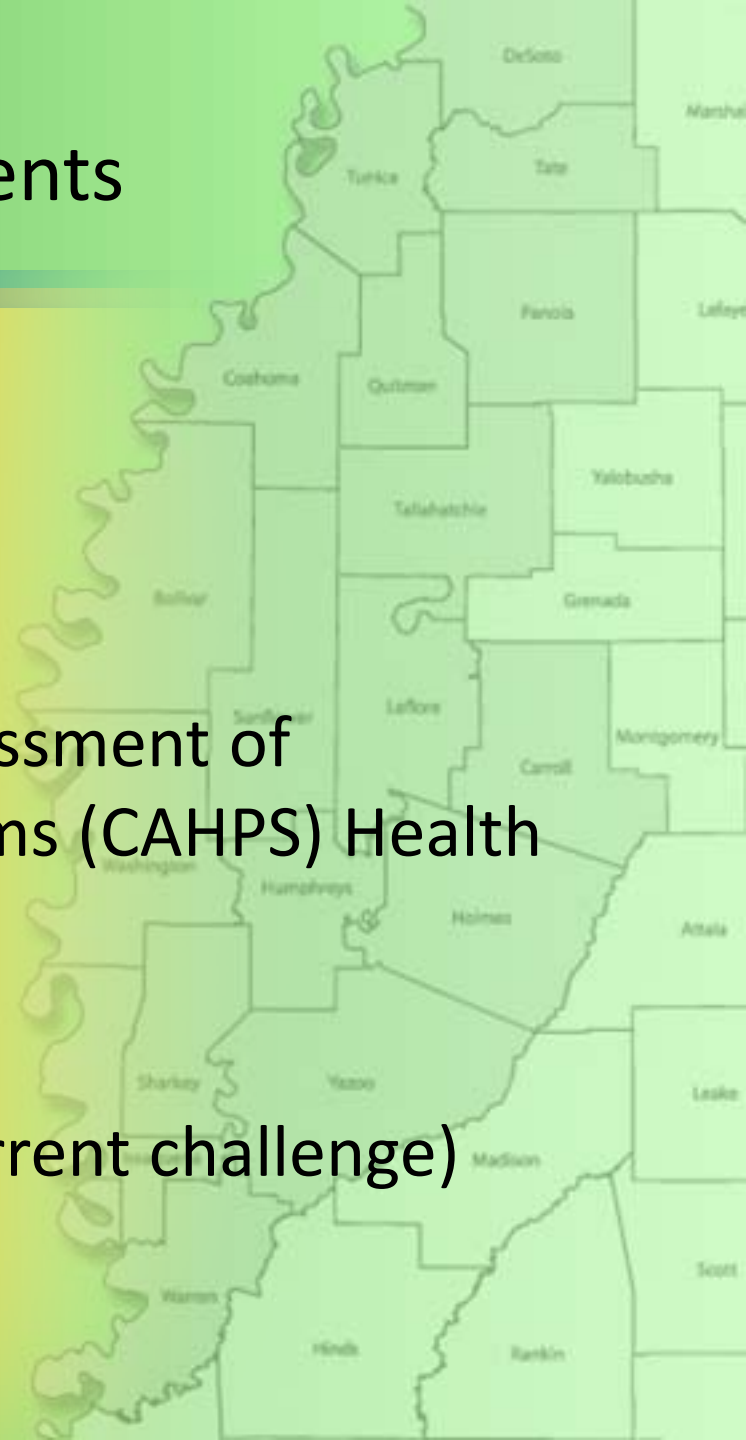
- Chart abstractions

## Patient satisfaction data

- Modified AHRQ Consumer Assessment of Healthcare Providers and Systems (CAHPS) Health Plan Survey 4.0

## Provider satisfaction data

- Provider satisfaction survey (current challenge)



# Baseline Data Analysis

## Demographics

	Non-EHR Site 001B	Non-EHR Site 003B	EHR Site 002B	EHR Site 004B
<b>Race / Ethnicity</b>				
African Amer.	66.3%	59.6%	92%	48%
Caucasian	32.7	25.3	4	44
Other	1	0	0	0.5
Unknown	0	15.1.	4	7
<b>Payer Source</b>				
Medicaid	24.8%	13.1%	20.0%	4.0%
Medicaid / Medicare	5.9	35.4	14.0	15.0
Medicare	12.9	19.2	35.0	49.0
Private	23.8	22.2	27.0	30.0
Self-Pay	29.7	9.1	3.0	1.0
Unknown	3.0	1.0	1.0	1.0



# Baseline Data Analysis: Diabetes Indicators

	Non-EHR Site 001B	Non-EHR Site 003B	EHR Site 002B	EHR Site 004B
<b>Complications within last 12 months</b>				
% yes	59%	96%	96%	88%
<b>Hospital Admissions / ED Visits</b>				
1 or more (%)	18%	23.2%	40.6%	17%
<b>A1C Tests</b>				
1 or more (%)	97%	84.8%	93%	97%
Patients with uncontrolled diabetes (A1C > 9%)	22.4%	21.4%	19.3%	12.4%
Mean A1C levels, per patient	7.9	7.8	7.9	7.2

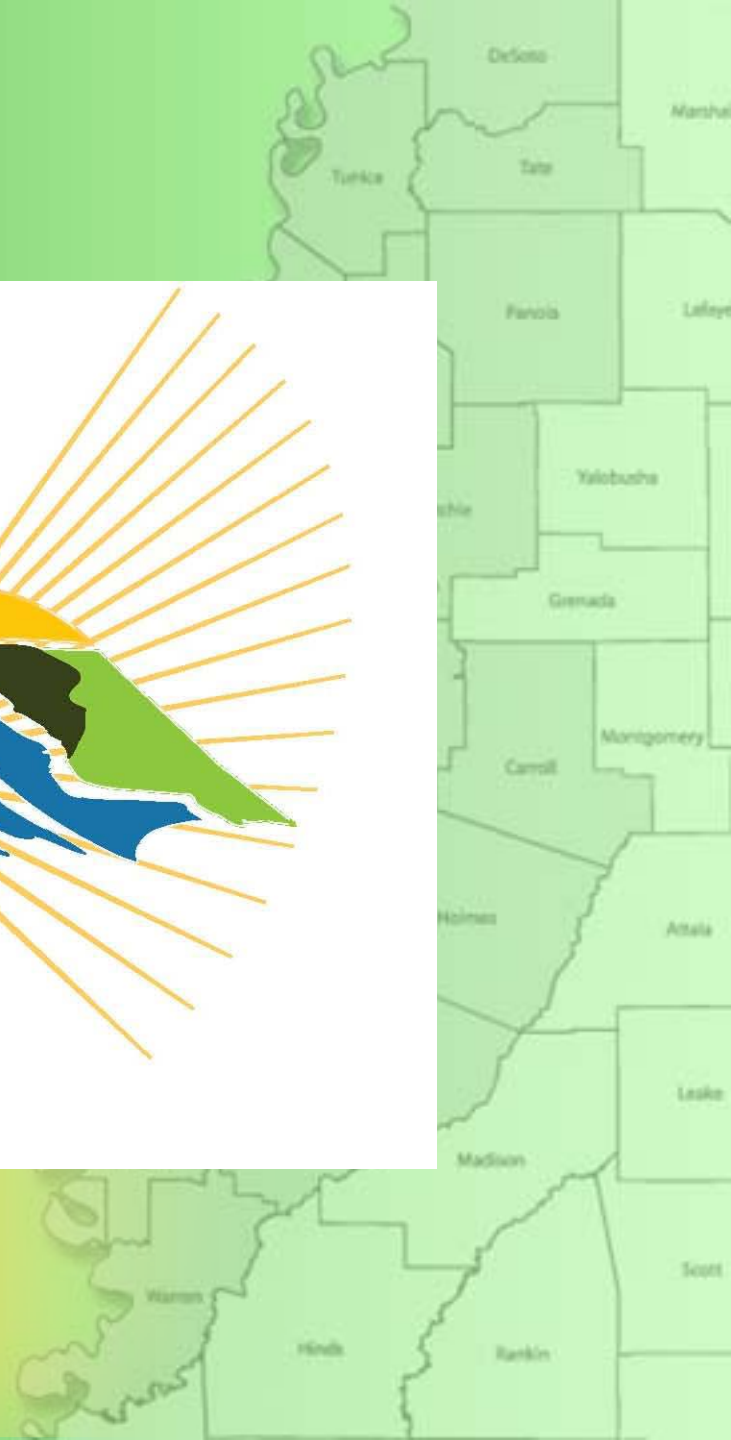
# Baseline Data Analysis: Screenings

	Non-EHR Site 001B	Non-EHR Site 003B	EHR Site 002B	EHR Site 004B
<b>LDL Tests</b>				
1 or more (%)	85.1%	42.4%	84%	87%
<b>Urine Protein Tests</b>				
1 or more (%)	77%	22.2%	84%	87%
<b>Dilated Eye Exams (referrals)</b>				
1 or more (%)	77%	22.2%	79.2%	84%
<b>Monofilament Foot Exam</b>				
% yes	83%	0%	1%	0%
<b>Foot Inspection</b>				
1 or more (%)	83%	25.2%	16.8%	21%

DELTA HEALTH ALLIANCE

**BLUES**

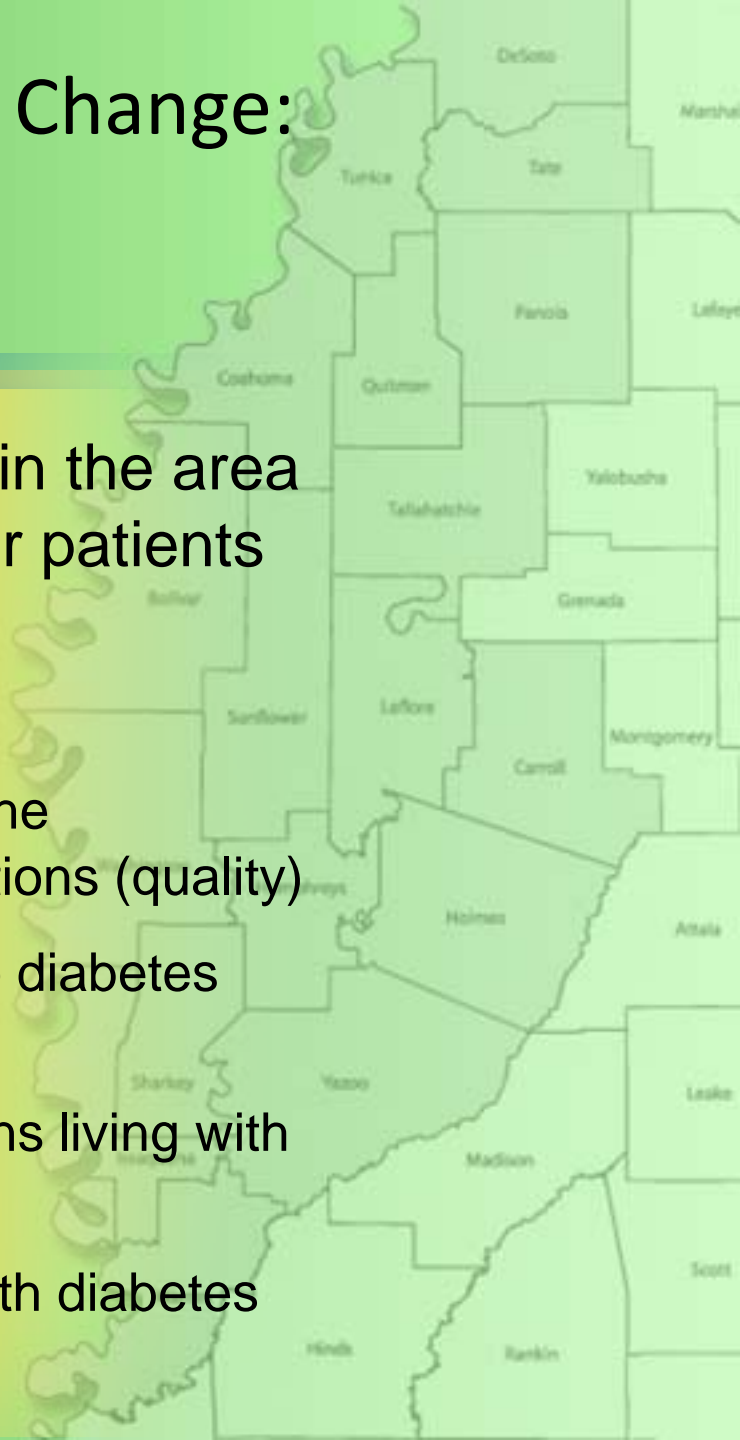
BEACON COMMUNITY





# A Community of Change: GOALS

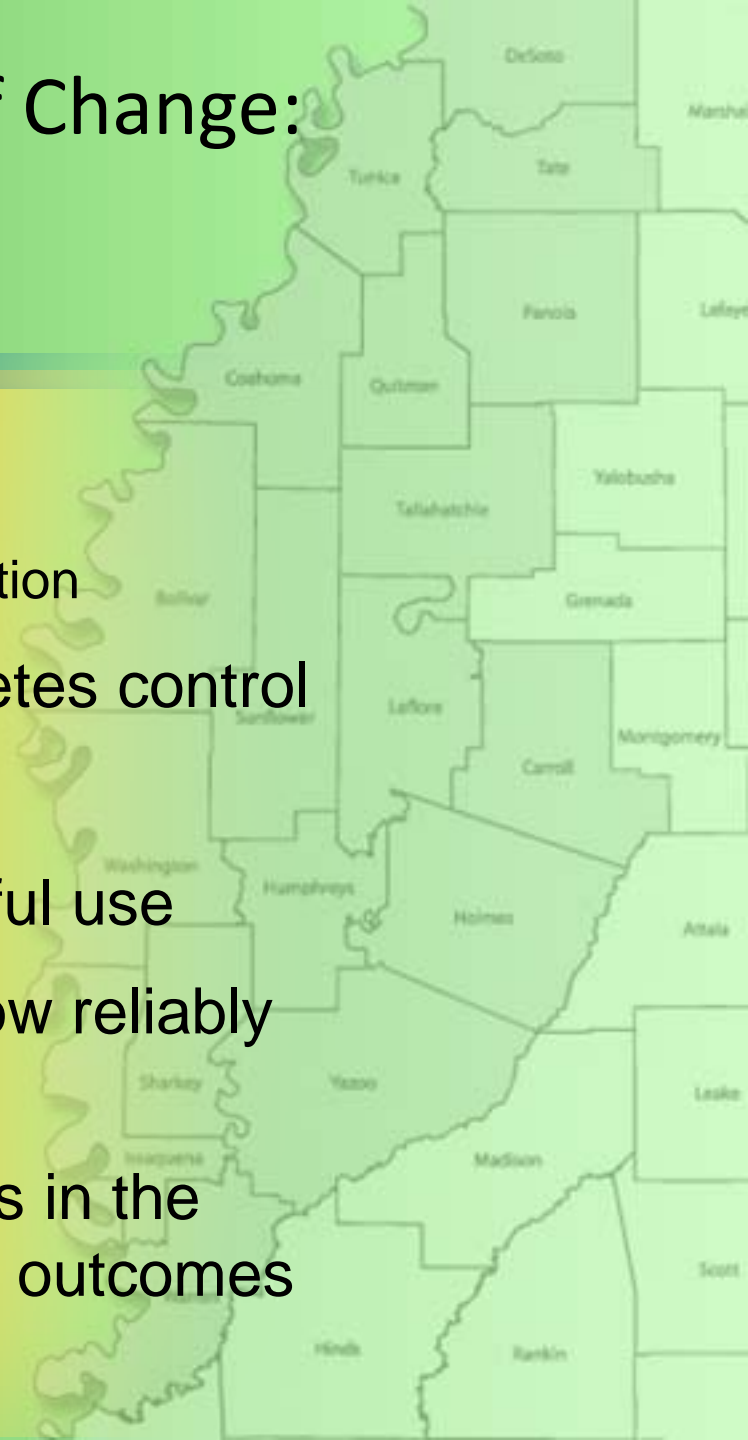
- Increase the efficiency of health care in the area by reducing excess health care costs for patients with diabetes through the use of clinical interventions that will:
  - Encourage the use of best practices for the management of diabetes and related conditions (quality)
  - Reduce preventable hospital stays due to diabetes (cost)
  - Increase medication adherence by persons living with diabetes (population health)
  - Improve the health outcomes for those with diabetes (population health)





# A Community of Change: GOALS

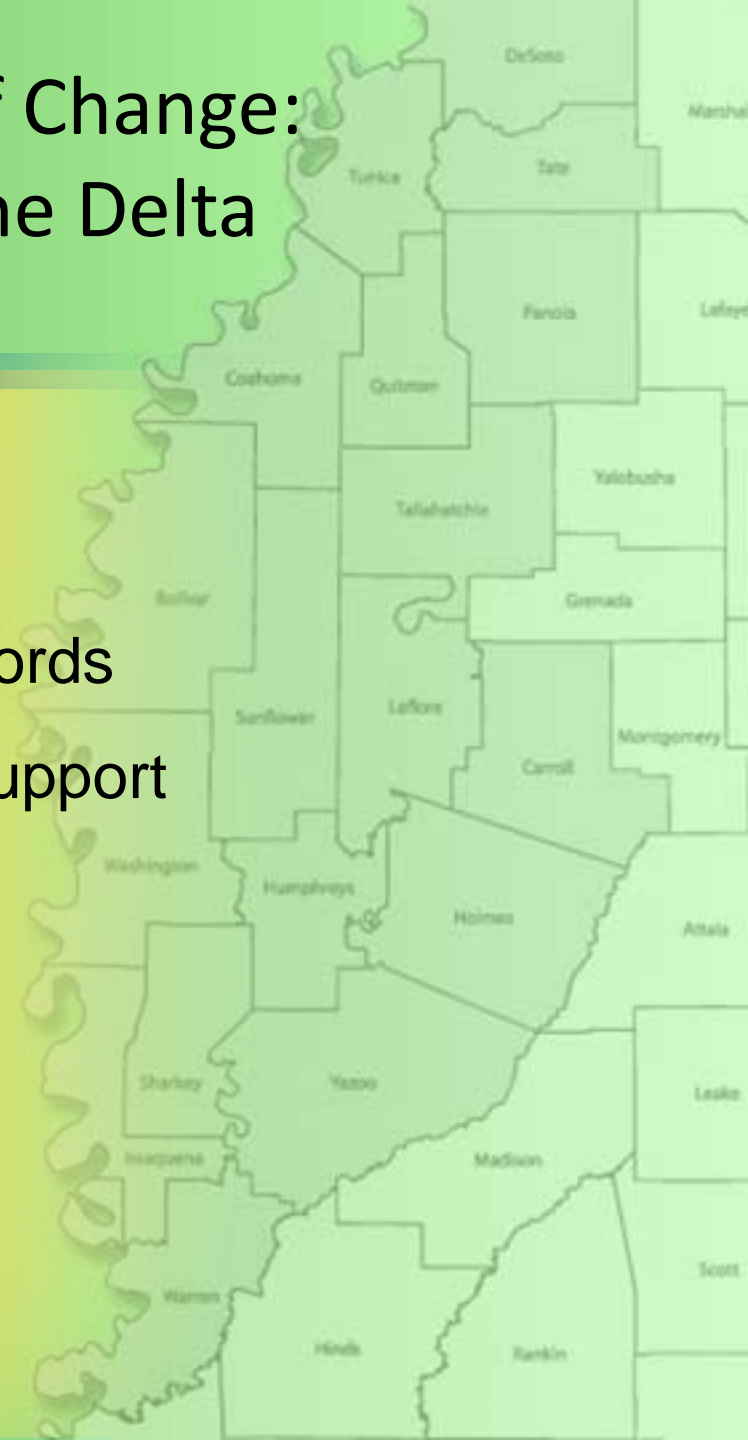
- Promote best practices
  - disease management and care coordination
- Improve monitoring systems for diabetes control
- Enhance patient education
- Set up providers to achieve meaningful use
- Ensure that health information can flow reliably and securely
- Improve effectiveness and efficiencies in the practice setting, including better patient outcomes





# A Community of Change: Modernizing the Delta

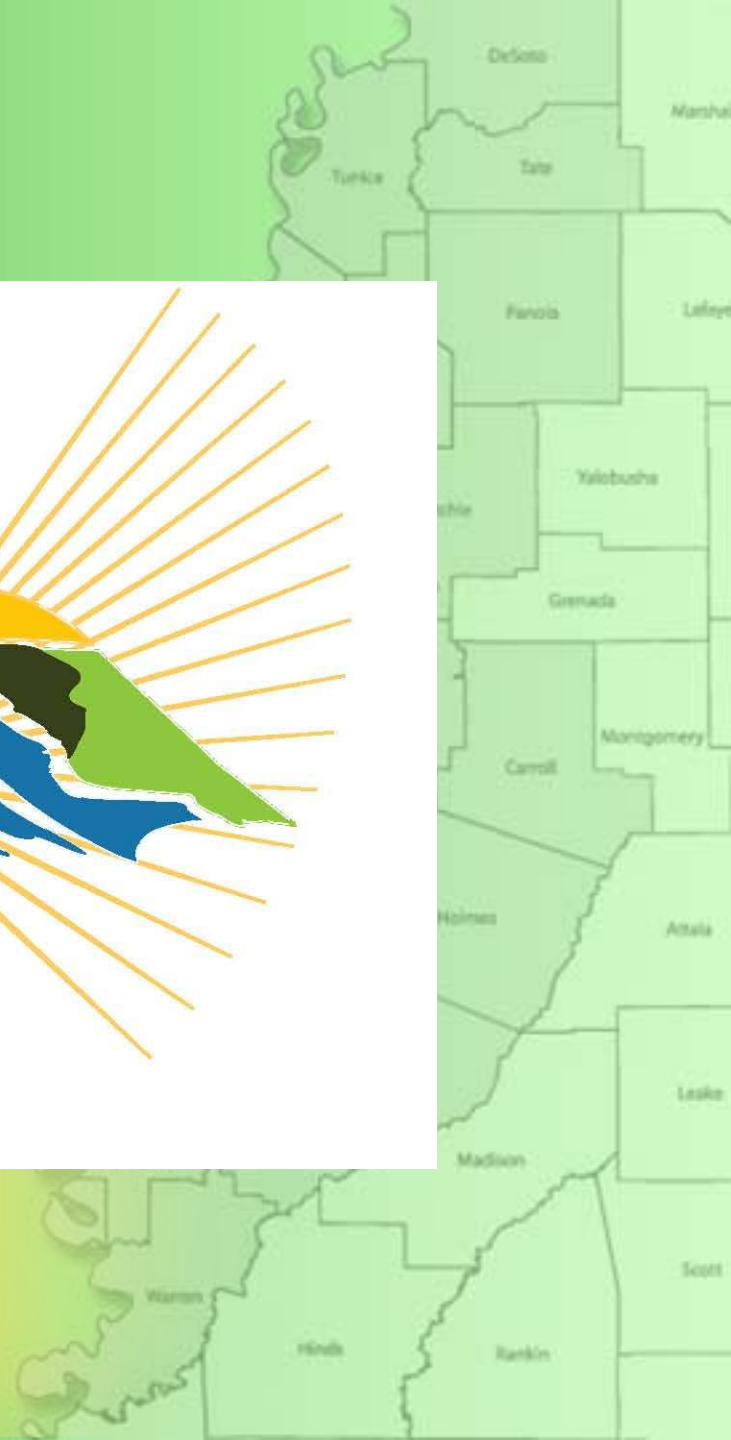
- Health Information Exchange
- Meaningful use electronic health records
- Implementation of clinical decision support
- Telehealth initiatives



DELTA HEALTH ALLIANCE

**BLUES**

BEACON COMMUNITY





# DELTA HEALTH ALLIANCE

**Solutions for a Healthy Tomorrow**

***The possibilities of Delta  
Health Alliance are endless.***