

Electronic Health Information Gets Boost

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By: Emily Bregel

A system upgrade to the state's largest public-private health information exchange will offer Tennessee doctors more ways to use electronic medical information for their patients, officials with the program said.

Chattanooga-based Shared Health plans to announce this week a technology platform upgrade that gives the system added features, based on physicians' suggestions, said Rick Krohn, marketing director for Shared Health, a wholly owned subsidiary of BlueCross BlueShield of Tennessee. "It's not just an electronic medical record. ... It also is a tool set for physicians that allows them to make better decisions, have access to more and better information that is being presented to them in such a way that it can be turned into actionable information," he said.

The new product, called Shared Health Clinical Xchange, is free to credentialed physicians, who must register to log on to the exchange, and will be accessible statewide by the end of the month, he said.

The web-based system includes an e-prescribing tool, and an electronic health record that shows patient data such as medications, lab results, immunizations, medical history and allergies. New applications can use a patient's health indicators to suggest a course of action for a provider, or sound an alert if a prescribed drug could have an adverse reaction with a patients allergies or another drug, Shared Health officials said.

In addition, a "clinical insight" feature will track providers' actions for their entire patient population, so physicians can observe any trends in their method of care, such as how often they do blood pressure readings for patients with hypertension, eye exams for diabetic patients or cancer screenings for patients, Mr. Krohn said.

The system is expected to cut down on physician practice or hospital inefficiencies, such as staff time devoted to chart look-ups and doctor-patient time spent rehashing medical histories, which will now be at the physician's fingertips, he said.

HEALTH INFORMATION IN TENNESSEE

Information technology for health care providers is growing rapidly in Tennessee, said Antoine Agassi, chairman of the Tennessee eHealth Advisory Council, which has worked closely with Shared Health on the health information exchange.

The council is working to get physicians in all 95 counties access to the secure Internet broadband connection, called the eHealth Exchange Zone — a simple and secure Internet connection that allows physicians to access resources such as Shared Health’s Clinical Xchange all from one point of access, he said.

Other states launching similar health IT programs tend to focus on urban centers, Mr. Agassi said, but Tennessee is one of the few concentrating on making these systems accessible for primary care doctors in the state’s rural counties.

At least a dozen large institutions in the state, including the Tennessee Department of Health, and about a dozen physicians’ practices are already using the exchange zone, he said.

The state health department is planning to make the state immunization registry and a controlled substance database accessible through the eHealth Exchange Zone by the end of the summer, said Mike Newman, director of the office for information technology services with the Tennessee Department of Health. The information is currently available but must be accessed through different Internet locations, Mr. Newman said.

The Tennessee Health Council is hoping eventually to get every licensed practitioner in the state on the network. The state will offer \$6,000 grants to offset start-up costs, Mr. Agassi said.

The grants should cover one-time fee and monthly authentication fees for one year, which can range from \$100 to \$1,000 a month, depending on the size of practice, he said.

“The goal is our intention in first year is for us to show them the value of how they are able to service their client, improve quality of care, get access to this information,” Mr. Agassi said. “We feel that’s a minimal investment to get all the necessary data in this complex health care ecosystem.”