



The CIO Role in ARRA

What's a CIO to do?

By: Ward Keever, CTG HealthCare Solutions Executive Director of Executive Services

Teamwork has never been more important if your organization is to be successful in the ARRA/HIE initiative. This is your opportunity to be viewed as an optimistic, indispensable team player!

The CIO's role in the ARRA/HIE endeavor may be more complex than it seems at first glance and is likely to require a demonstration of superb teamwork on your part. Unlike two previous initiatives, CHINs and RHIOs, this initiative is clearly focused on clinical outcomes and requires strong clinical leadership—both to initiate the projects and to sustain ongoing active participation—to attain the promised results. And yet, these projects will never succeed without strong CIO support and participation. Thus, teamwork has never been more important if your organization is to be successful in the ARRA/HIE initiative. This is your opportunity to be viewed as an optimistic, indispensable team player!

If you're an old guy like me, you'll remember back when the buzz was all about CHINS (Community Healthcare Information Networks). As CIOs, we had a grand network solution that would allow clinicians to exchange information about their patients. In fact, an organization was created to promote CHINs with a monthly newsletter. The only problem was that the clinicians did not see the need or value in participating in a CHIN. So we watched a grand and glorious technology solution die for want of a recognized and agreed-upon need.

Another failed attempt

Recently we found our "promised land" again: Regional Health Information Organizations (RHIOs). Again we, as CIOs, promoted an exciting technical solution to exchange information among clinicians. In fact, the federal government provided grants for a few experiments, including Santa Barbara and other locations.

There were only a couple of problems:

1. What happened when the grant money ran out and there was no business model to sustain ongoing operations?
2. Did a high percentage of healthcare providers and community physicians really want to collaborate and play together? I am aware of one CIO who was told by his CEO that he could not, under any circumstances, offer to involve his organization in a statewide solution. You see, that particular healthcare provider already had a lock on the local geographic area, and the CEO (a physician himself) had no interest in sharing clinical information with his competitors. When it comes to exchanging clinical information, most RHIOs have never grown beyond a hospital giving its local physicians the ability to look up clinical results on the hospital's computer



Up until now, the technology and solutions that a CIO could provide have not been based on a sustainable business model, nor have they found a receptive audience among competing organizations.

In summary, up until now (with some exceptions), the technology and solutions that a CIO could provide have not been based on a sustainable business model, nor have they found a receptive audience among competing organizations.

3. Oh yes, there is a third problem. Most doctors' offices are still very paper intensive. Right behind the computer terminal at the receptionist's desk is a whole wall of paper files. I recently had to go to a specialist's office for treatment on my foot. The practice that I went to has six physicians and is part of a large regional healthcare provider. The first thing I was asked to do was fill out my life history, including my insurance information, even though I've had many encounters with other providers within the organization, including a recent visit to my primary care physician—the one who recommended that I see the foot specialist in the first place!

Thus, from the time that computerized connectivity and information sharing was first identified as a great solution several years ago, many healthcare provider organizations still did not consider clinical information exchange to be a priority due to funding, competition concerns and a host of other reasons such as apathy or fear of computerized medical records. That is until ARRA...

Motivating clinicians

So now the federal government is trying a different tact. Rather than simply hope that clinicians will agree to exchange information because it's in the best interest of the patient, or offer grants for regional electronic connectivity experiments that can't sustain themselves beyond the grant funding, the federal government is now saying that it will:

- Help fund the acquisition of these computer-based systems via ARRA/HITECH incentives
- Define success with criteria for both hospitals (25 criteria) and physicians (23 criteria), including sending information electronically to another EMR
- Penalize physicians and hospitals who don't implement computerized applications and information exchange (by reducing reimbursements to those who fail to demonstrate meaningful use)

The expectation is that this time, clinicians will have the incentive to agree that there is a need to participate. In fact, I would not be surprised if ARRA/HIE participation becomes a critical component of re-credentialing for physicians, as an added push.

The solution requires a team effort

There has never been a question about whether a CIO and the IT staff could provide a technical solution for computerizing clinical systems in ambulatory offices and exchanging information among providers. But to take advantage of the opportunity the federal government is facilitating, and to capitalize on the promise of greater clinical adoption, a CIO must practice a high degree of teamwork with



Ward Keever serves as Executive Director for CTG HealthCare Solutions' Executive Services. As a former CIO, he has over 35 years of experience in the healthcare IT industry, with a strong background in strategy development and implementing strategic and tactical IT systems in large health system settings and specific solutions for applications within the healthcare industry.

Ward is a Founding Trustee of CHIME and co-founder of HISEA.

For more information, contact:

Ward Keever

ward.keever@ctghs.com

his/her clinician partners. In many instances, depending upon your place in the organization, you may be called upon to assume a junior role—with the CMIO or senior VP for medical affairs assuming the lead role.

Additionally, a CIO will have to learn how to work with his/her clinical partner to market these solutions to appeal to community clinicians. These skills are not typically in a CIO's "bag of tricks," nor do they fall under physician leadership for that matter. Teamwork and flexibility, while remaining focused on delivering the technology, will be the watchwords.

Al Campanella, senior vice president and CIO of Virtua Healthcare, describes IT's unique role in the pursuit of meaningful use:

"Meaningful use is an output or outcome of EMR transactions, not an input. Inputs to achieve meaningful use of EMRs include:

- a) Implementing technologies that benefit clinical efficiencies and quality clinical outcomes
- b) Allocating personnel resources to facilitate workflow redesign workshops and other change management techniques that will reengineer the delivery of clinical services—all while using IT as an enabler to achieve measurable clinical outcomes
- c) Allocating the personnel resources to manage the data, metadata, and reportable metrics that demonstrate outcomes"

As you read Al's comments, think about how important the application of IT is to the success of the project . . . and yet (once again) how utterly useless the IT solution will become without a very strong commitment from clinical leadership and community physicians.

This is clearly a time for the CIO to assume a supporting role and to be an enthusiastic partner—a partner who can:

- Translate the technology-speak into terms meaningful to clinicians
- Help clinicians overcome the fears and uncertainty for their patients, their practices, and their privacy and confidentiality
- Provide supporting organizational and project leadership skills to construct a reliable approach that will incorporate technology, process redesign, and identification of measurable metrics to yield results
- Band people together to explore the evolving regulations and opportunities, business implications, marketing approaches, and your own enterprise incentives to achieve what has heretofore been unachievable

In other words, an indispensable partner.

Tally Ho!

Ward