



West Virginia  
Health Improvement Institute

---

# **TRANSFORMING HEALTHCARE IN WEST VIRGINIA: UPDATE**

**August 31, 2010**

**Roger Chaufournier**

**Chair of the Health Improvement Institute**

# UPDATES

- The Health Improvement Institute
- The shared savings pilot project initiative to establish patient-centered medical homes
- Child Health Outcome Initiative
- Regional Health Information Technology Extension Center
- Integration of behavioral health with primary care.



# REMINDER OF OUR ROOTS

- Medicaid Transformation Grants-Grant II
- Goals
  - Improve health of all West Virginians
  - Focus on transforming the primary care system to a medical home model
  - Use Medicaid federal support as a vehicle to accelerate the above; but make the Institute for all populations
  - Create a vehicle for stakeholders to convene to collaborate on improving all aspects of the delivery system

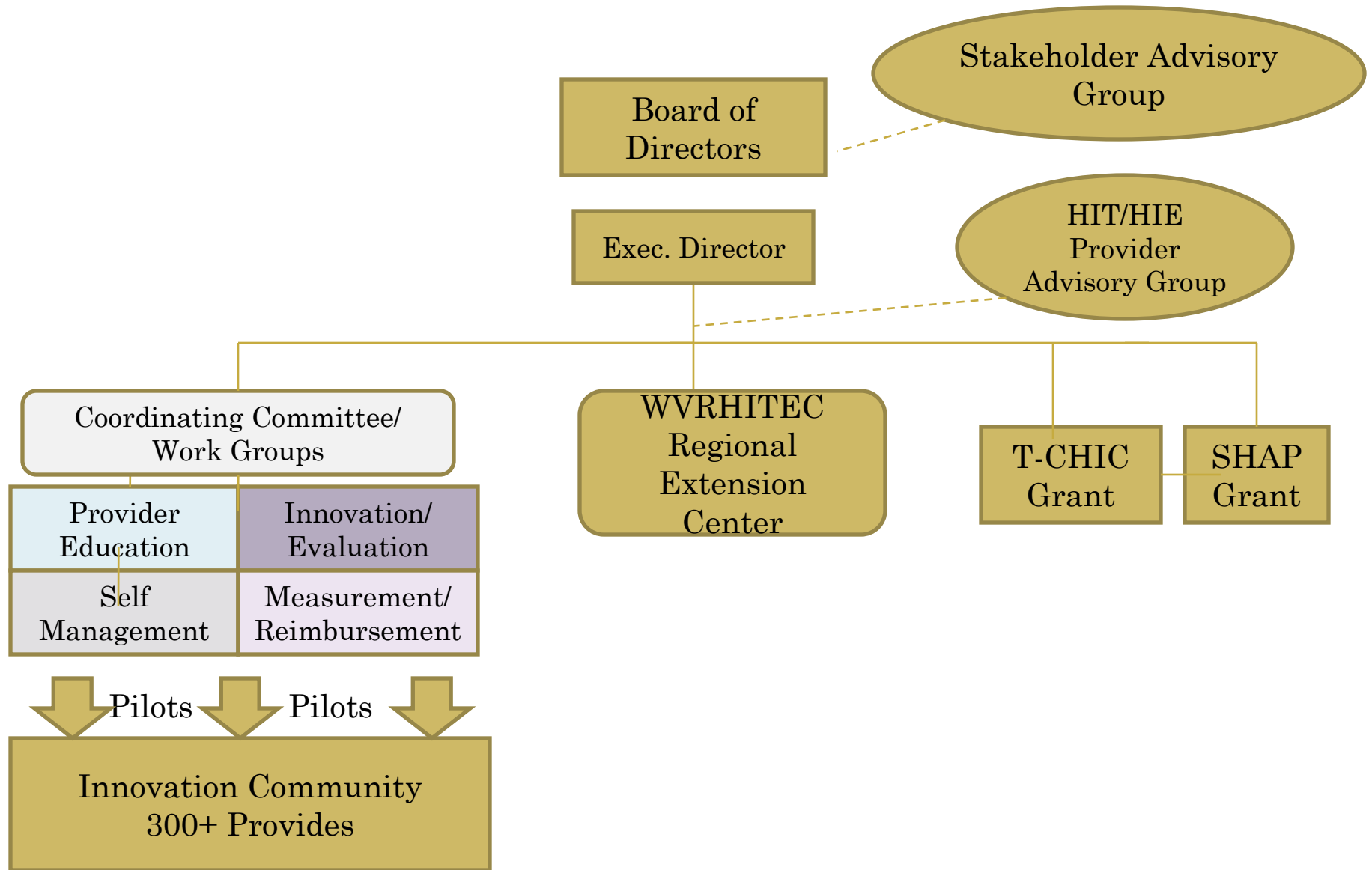


# UPDATE ON THE INSTITUTE

- First Meeting April 2008
- Work Groups Established
  - Measurement and Reimbursement
  - Self-Management
  - Provider Outreach and Education
  - HIT Adoption
  - Innovation and Evaluation (2009)
  - Behavioral Health(2010)
- Incorporated in 2009 as Not for Profit
- Awarded HIT Regional Extension Center February 2010 by Office of the National Coordinator
- Awarded CMS Child Quality Grant April 2010



# WEST VIRGINIA HEALTH IMPROVEMENT INSTITUTE



# PILOTS

- Pediatric Obesity Documentation
- Reporting/Measurement
- Stanford Self-Management Spread
- What to Do When Your Child is Sick
- Shared Care Coordinator
- Open Source EHR & PHR
- HIT Incentives
- SSI Complex Care Management
- Medical Home Shared savings



# MEDICAL HOME PILOT

## ○ Aims:

- All participants become NCQA recognized
- Demonstrate improvements in process & outcome measures-monthly reporting
- Align with Meaningful Use Incentive Program
- Demonstrate a business case for all

## ○ Participants

- Private Practices
- AHEC/Academic Centers
- FQHCs
- Free Clinics

## ○ Shared Savings Model- Up to 5% net savings split between payers and providers-Pooled



# T-CHIC

- Tri-State Children's Health Initiative Collaborative- Oregon, Alaska and West Virginia
- 5 Year Quality Demonstration on Pediatric Measures of Quality
- Recruit 20 Pediatricians to serve as medical homes
- Use shared care coordinators/ case managers and Patient Health Record
- Voluntary reporting of core quality measures developed by CMS and AHRQ



# BEHAVIORAL HEALTH WORK GROUPS

- Launched This Summer
- Three Works Groups
  - Develop a model for integration of primary care and behavioral health
  - Administrative Simplification, Measurement and Reporting
  - Patient Experience
- Work to Date:
  - Review of collateral education materials on changes
  - Development of coding cross walk
  - Inventory of state-based resources
  - Draft model of integration





West Virginia Regional Health Information  
Technology Extension Center

# Technology as a Driver for Transformation



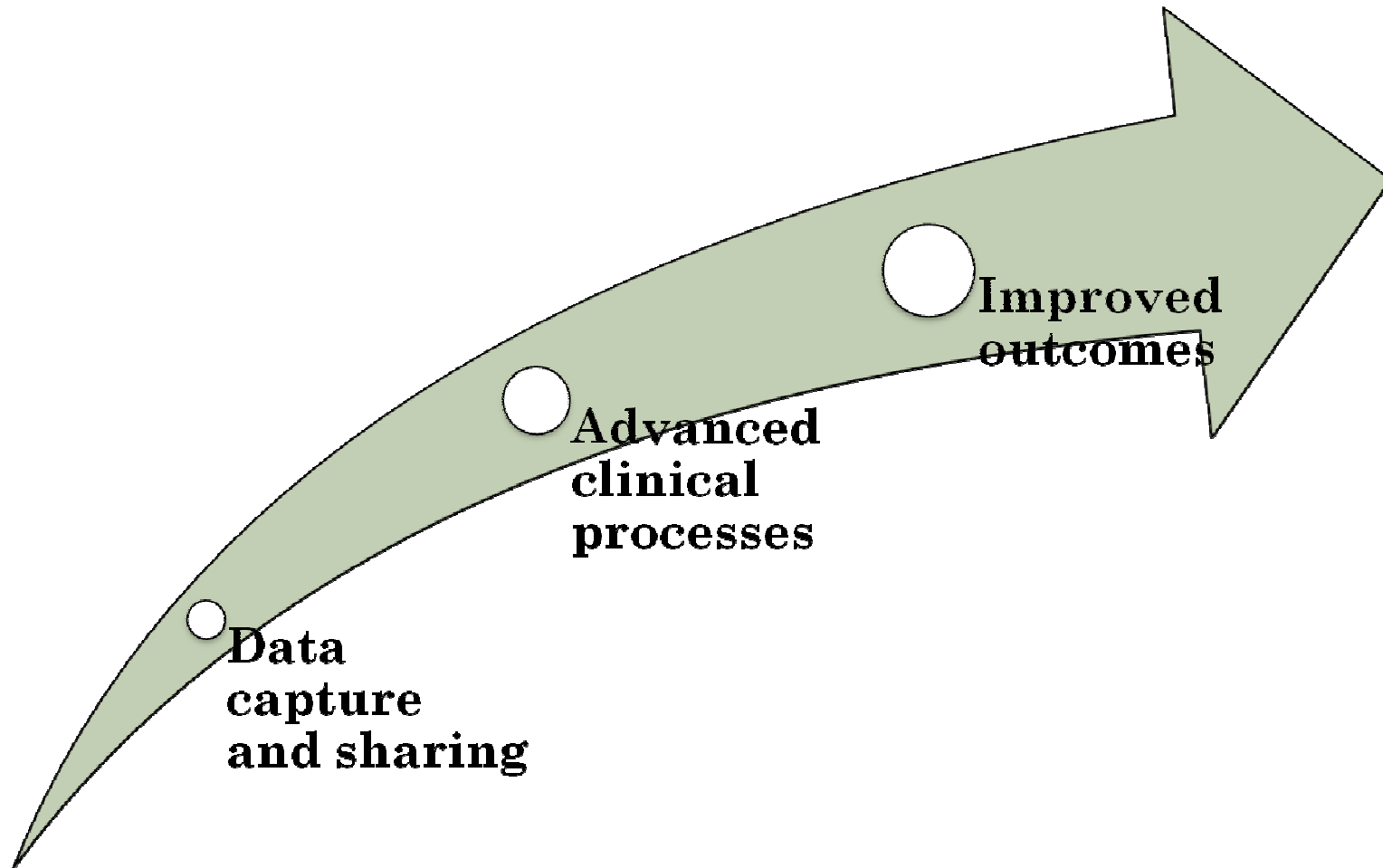
# BENDING THE CURVE TOWARDS TRANSFORMED HEALTH *ACHIEVING MEANINGFUL USE OF HEALTH DATA*

**2009**

**2011**

**2013**

**2015**



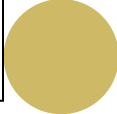
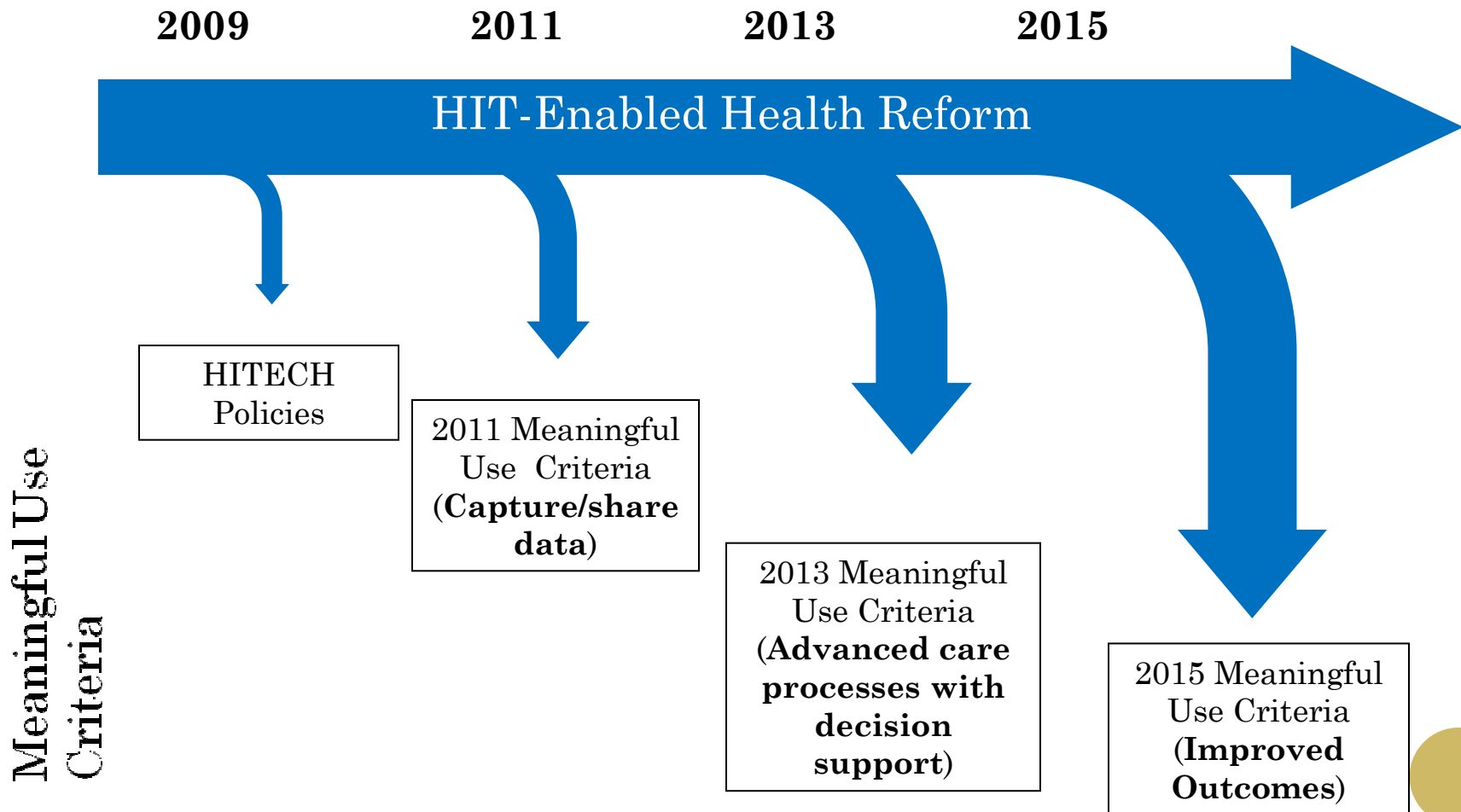
**Data  
capture  
and sharing**

**Advanced  
clinical  
processes**

**Improved  
outcomes**

# HIT-ENABLED HEALTH REFORM

*ACHIEVING MEANINGFUL USE*



## GOALS FOR MEANINGFUL USE

- National Goal: 100,000 providers at meaningful use by 2012
- West Virginia Goal: 1,000 providers at meaningful use by 2012




# WVRHITEC MEMBERSHIP

**Membership Organization open to all health care providers**


**Membership fee of \$300**

**Grant-funded subsidy for discounted services for Priority Primary-care Providers”**

- Any doctor of medicine or osteopathy, any nurse practitioner, nurse midwife, or physician assistant with prescriptive privileges in the locality where s/he practices, who is actively practicing one of the following specialties: family, internal, pediatric, or obstetrics and gynecology
  - Primary care physicians working with critical access hospitals
- 

# MEMBERSHIP BENEFITS

## **Direct Membership Benefits:**

- EHR/practice assessment
  - Access to education and training services at member rate
    - EHR assistance knowledge and services
    - Services to achieve “meaningful use”
    - Specialty services
  - Access to subsidized service hours (90% subsidy) for PPCPs
    - With an EHR
    - Without an EHR
  - Hosted EHR options
  - Access to expert advice and capabilities from federal agencies
  - CME credit
  - Possible EHR/HIT financing, lending opportunities
  - Ongoing communication
- 

# WVRHITEC SERVICES

- On-site assessment
- Consultation and assistance with EHR implementation, effective use, upgrading, and ongoing maintenance
- Recommended EHR vendor list
- Access to hosted EHR systems (certified)
- Guidance and training on achieving “meaningful use”
- Information about Medicare/Medicaid incentive payments
- Training on privacy (HIPAA), security, data storage, etc.
- Integration of health information technology, including EHRs, into the initial and ongoing training of health professionals
- Development of health data analysis, extraction and report applications
- Group purchasing opportunities
- Support for participation in health information exchanges
- Dissemination of best practices



# WVRHITEC MILESTONES

**Participants in the WVRHITEC will be expected to work toward achievement of Stage One of “meaningful use” of certified EHR technology. This is accomplished by completing three milestone stages:**

**Milestone One** -when the WVRHITEC receives a signed Participation Agreement from an eligible entity with primary care providers. (*Entities without an EHR must agree to have one set up within 12 months.*)

**Milestone Two** -when a practice and the associated providers have gone live on a certified EHR. “Go Live” is considered achieved when e-Prescribing and quality reporting measures are actively being utilized.

**Milestone Three** - when a practice and its associated providers have met meaningful use. ONC will verify “meaningful use” based on a standard to be set by CMS.



## FOR MORE INFORMATION:

- [www.wvhealthimprovement.org](http://www.wvhealthimprovement.org)
- [www.wvrhitec.org](http://www.wvrhitec.org)
- [rchaufournier@spreadinnovation.com](mailto:rchaufournier@spreadinnovation.com)

