



East Boston Neighborhood Health Center Eyes Improved Care Transitions, Outcomes With Health IT

With more than 250,000 annual patient visits, 100 physicians, an emergency department, and a wide array of primary and specialty care services, East Boston Neighborhood Health Center (EBNHC) is among the nation's largest Federally Qualified Health Centers (FQHCs). It's also a study in how effective health IT can streamline transitions between care settings, advance care delivery, and improve outcomes for a culturally diverse population.

Headquartered in Boston's most geographically isolated neighborhood – it is almost completely surrounded by water and wedged next to the Logan International Airport – the center has managed to turn its location into an asset, drawing a heavy patient market share from “Eastie” and the nearby communities of Chelsea, Revere Winthrop, and Everett. The center boasts a pediatric department that cares for virtually every East Boston child.

The robust outfit, which includes a senior care program that keeps elders at home, is an early adopter of health IT and a staunch champion for technology, as it helps monitor and organize patients shuffling among the center's numerous departments.

“The transition of care between primary care and the emergency department was always difficult when it came to paper [charts],” said Laura Rogers, VP and CIO at EBNHC. “Staff could quickly see the benefit of having information readily available to them no matter what department the patient was in.”

Rogers has been there for every step of EBNHC's Health IT journey, guiding the center through the implementation of new systems, including Epic's EpiCare EHR. In fact, the center uses Epic for all health IT, including managed care for the senior program and a Radiology Information System (RIS) for the digital radiology suite that opened in 2009. Rogers said using Epic as an enterprise system prevents the center from creating multiple interfaces that connect divergent systems.

In the emergency department (ED), which serves as a common entry point for patients who become steady users of EBNHC's services, an electronic tracking program implemented nearly a decade ago improves patient flow and care delivery. The center can map each patient's experience and metrics regarding their treatment, including arrival time, reason for seeking care, wait time, and the department the patient received care from after the ED. The system effectively follows patients across the care continuum.

Breaking Barriers

Similar to other FQHCs in Massachusetts, EBNHC caters to a culturally diverse population including many patients who are non-English speaking. The center provides interpreter services for 24 languages and most doctors and staff are fluent in Spanish, the language of a high percentage of EBNHC patients.

“I think we've done a great job, but we are always struggling to keep up with not just language, but the cultural barriers as well,” said Rogers.

The center offers Epic's patient portal MyChart, which allows online communication between patient and provider. The patient portal concept is part of Meaningful Use Stage 2 and Epic offers MyChart in Spanish, which may help the center increase patient engagement with the portal. EBNHC is currently undertaking a marketing campaign to encourage patient Health IT use.

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Providing Real Results in Real-Time

Since EBNHC went live with its EHR in 2004, the center and its patients have enjoyed numerous benefits. For example, medication orders are immediately available to the center's pharmacy. Likewise, orders for tests are waiting when the patient arrives at a lab.

"It's just a huge patient care improvement," said Rogers. "They're not waiting around. The lab knows when a patient comes in and what test has been ordered. It's hard to believe how different things were with paper."

The center can also tie the EHR to specific quality improvements. For example, it has significantly boosted the percentage of patients contacted by EBNHC within two days of hospital discharge. The increase is accomplished through streamlined communication among care team members, comprehensive collection of data (both internal to EBNHC and external to hospitals), and tracking of outreach to patients. Since implementation of EHR tracking, two-day outreach at EBNHC increased from 51 percent in June 2012 to 70 percent in October 2013.

On the clinical side, the EHR has increased prescribed controller medications for persistent asthmatics. Specifically, the EHR helps EBNHC classify asthmatics more granularly so that individuals with persistent asthma are highlighted. Between May and October 2013, the center achieved 100 percent compliance of persistent asthma patients on controller medications.

For the future, Rogers said EBNHC is trying to determine how to better use its EHR for decision support, such as notifying providers when a patient is due for a mammogram or whether a patient's medical profile puts him or her at risk for different diseases.

Here Comes MU Stage 2

Nearly all of EBNHC's physicians have attested to Meaningful Use Stage 1 (90 Day) and are in the process of achieving full year attestation. Stage 2 is approaching quickly and the center will be among the first in Massachusetts to reach one of Stage 2's key components, use of health information exchange (HIE). Specifically, the center is slated to go live on the Mass Hlway, the state's HIE, by year's end, and will also connect to the Massachusetts Immunization Information System (MIIS), a web-based immunization registry operated by the Commonwealth.

Current plans call for the Hlway to connect all Massachusetts health care providers through a secure, uniform electronic system by 2017.

"I see a huge potential benefit of connecting all providers, particularly around behavioral health integration," said Rogers. "A lot of those services are outsourced to different organizations and facilities that we don't have an easy way to communicate with."

Since EBNHC took hold of health IT in the late '90s, strong senior leadership support for new technology has served as a driving factor in the center's success, as has hiring an engaged staff, said Rogers. Similar to other providers who travelled down the paperless path, the transition works best when medical staff and administrators are well trained in the technology, trust that electronic data is secure and reliable, and embrace its capability to improve care.

"Now when you talk to some of the same doctors who are still here they laugh because they can't do without the system and never want to see paper again," she said.

With funding support from the Massachusetts eHealth Institute (MeHI), EBNHC worked with Boston Medical Center (BMC) to serve as the Implementation Optimization Organization (IOO) that guided the center through Meaningful Use. Assistance included help with the center's data security audit, upgrades to its business object reporting system needed to create certified reports for Meaningful Use, and provided guidance on objectives and measures. To date, Ninety-six percent of EBNHC's providers have attested to Meaningful Use Stage 1 (90 day) and have received \$1.6 million in incentive payments through the Massachusetts Medicaid EHR Incentive Payment Program.
