



Health Information Technology: Not If, But When

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Since President Obama announced his \$19 billion budget for a nationwide upgrade of health care information technology (IT), some skeptics have argued that those precious taxpayer dollars are wasted. I could not disagree more strongly.

While it is true that no single element of health care reform will make America's system both more affordable and universally available, health IT must be part of the solution for either goal to be achieved. Delivering more services to more people for less money is the definition of increased productivity. Virtually every American industry except health care has used IT over the past two decades to drive productivity growth. For those other industries, there were skeptics who claimed that the investment in IT would not pay off. They claimed that the old systems were too disparate to be tied together, that the capital outlay would not be returned, that professionals would not adapt their routines to the new systems, and that the training hurdle would be too difficult and too expensive.

We hear all those same arguments against health IT. But consider what health care providers know about our own opportunity.

For many years now, the benefits of technology to patient care have been acknowledged by several government agencies, health care systems and independent organizations. According to the Joint Commission November 2008 Hospital of the Future Report: "Information technology plays a major role in improving health care quality and safety, and can help to support the migration of hospital-based care into the community and even the home."

I know from my everyday experience running Catholic Healthcare West, a non-profit system of 41 hospitals serving a population spanning 22 million people across California, Arizona and Nevada, that the proper use of clinical systems allows physicians and nurses to spend more of their time with patients instead of paperwork. I also know the cost and complexities surrounding the use of this technology. CHW has a blend of hospitals whose health IT implementation ranges from robust to rudimentary.

The reality of providing care for today's patient is that there is a web of medical providers, not just one doctor in one office. Electronic medical records (EMR) enables secure, real-time access to clinical and

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treatment information for physicians, nurses, pharmacists and all other caregivers. This web of providers can now have around-the-clock access to all the information they need – patient medical histories, pharmacy records, lab reports, physician notes, etc. – which allows each medical provider to make better point-of-care decisions. Let me give a few examples.

- When we recently rolled out MobileMD, an application allowing community physicians secure access to patient records wherever they are, Dr. Roy Greenberg, a family physician in Folsom, CA told us, “I thought I might be inundated with information I did not need, but that didn’t happen. I received timely information on labs and consultations in the hospital and was able to keep abreast of my patients in the hospital, real-time. I see it as a real boon to primary care doctors.”
- In San Francisco, the universal care initiative we helped develop, Healthy San Francisco, now has an information system that ties community clinics to our hospitals. For the most needy in that community, the EMR helps ensure that appropriate preventive care and chronic disease management occur in the clinic, not in the emergency room. At those clinics, the EMR has prevented some patients from inappropriately filling Class III narcotic prescription drugs and re-selling them on the street to recreational users.
- Within Catholic Healthcare West, in our hospitals with EMRs versus those without, we can measure the difference Health IT makes. Emergency room patients are moving more quickly from triage to treatment. Patients are receiving medications more quickly. Doctors and nurses spend less time filling out paper forms, which in turn has allowed us to reduce storage costs by 50%. And, most importantly, we see clear improvements in patient outcomes.

Are there challenges with health information technology? Of course there are. Yes, they are expensive. Yes, there is resistance to change. Yet these are the same challenges that other American industries have faced and overcome. It is time for health care providers to overcome the difficulties and reap the benefits.

EMR does not stand for Electronic Miracle Records. However, with bi-partisan support from our nation’s leaders, this can become a powerful tool to meet citizens’ demands for lower cost, better outcomes, and broader access.

The Obama administration understands the importance of health information technology as a viable solution to achieving comprehensive health care reform. While the Administration’s initial budget of \$19 billion is a fraction of the system-wide need, that bold commitment will drive billions more in private-sector investment from providers like us. Now is the time to stop arguing about the precise short-term benefits and get on with the business of applying American ingenuity, entrepreneurship and management skill to bring our industry into the 21st century.