Health Information Technology: Leveraging Information to Drive Practice

“A Dose of Reality in the Virtual World of Health IT”
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A. D. Racine, M.D., Ph.D.
Senior Vice-President and Chief Medical Officer
Montefiore Medical Center

Montefiore’s Integrated Delivery System

Our Locations

1,491 Beds Across 4 Hospitals
   – Including 120 beds at CHAM
26 Primary Care Sites
   – 21 Montefiore Medical Group Sites
19 School Health Clinics
9 Mental Health / Substance Abuse Treatment Clinics
49 Specialty Care Sites
   – 2 Multi-Specialty Centers
   – 4 Pediatric Specialty Centers
   – 15 Women’s Health Centers
5 Dental Centers
5 Imaging Centers

Montefiore: An Introduction – Revised 5/2012
Our Community
Bronx, NY – 1.4 Million Residents

Montefiore Inpatient Discharges
By Patient Origin - 2010

Underserved Population
with a High-Demand for Care

30% Live at or Below the Poverty Line
- 12.5% unemployment rate in 2010
- 89% non-white minority
- 43% of children are at or below poverty

High Burden of Chronic Disease
- 11% have diabetes
- 29% are obese
- 16% have asthma

High Utilization of Hospital Care
- Top 10th percentile of national utilization rates per Medicare eligible
- Montefiore sees 300K ED visits a year, the second busiest ED in the nation

High Proportion Lack Health Insurance
or part of Public Insurance Programs
- 15% uninsured in 2010
- 80% public payer (Medicare/Medicaid)

Market Share of Inpatient Discharges
Bronx Residents - 2010

Three phases of IT use

1. Transactional database
2. Decision support at the individual level
3. Performance improvement at the population level
BOPS: Critical Design Elements

- Leadership focus
- IT interface
- Coaching cadre
- Incentives
- Learning Collaborative
BOPS Screening Domains

- Newborn Screening
- Infant and Toddler Developmental and Social emotional Screening
- School age and adolescent mental health screening
- Adolescent sexual activity and sexually transmitted infection screening
Documenting Sexual History and Screening for GC/Chlamydia at Non-HCM Visits

Eligible Patient Volumes
- BOPS+ 3813 visits
- Non-BOPS+ 2893 visits