Building value-based framework for EHR interoperability depends on provider ease-of-use

Interoperable ATMs have been a benchmark for EHRs and now, they're making progress toward a similar interoperability says Scott Weingarten.

While most of the discussion around EHRs and interoperability tends to the negative -- tricky interfaces and misaligned business incentives if not outright information blocking -- heading into HIMSS18 is a good time to also consider some of the progress.

"There have been great strides made with these companies in terms of improving interoperability, or improving communication between different
EHRs," said Scott Weingarten, MD, senior vice president and chief clinical transformation officer at Cedars-Sinai.

Virtually all hospitals and providers, or at least the overwhelming majority, have adopted an EHR and that's a start. Next up: Harnessing EHRs to move to value-based care because of the data they house.

Specifically, said Weingarten, EHR data can help a provider avoid low-quality care, in which the harms of a test or treatment may outweigh the benefits, or there are no benefits at all. Weingarten sees this a lot with certain drug prescriptions for patients older than 65. Some ill-advised medications can increase the probability of falls resulting in hip fractures, for instance, and there are cost implications there: An otherwise healthy patient having a hip fracture requires additional treatment and is subjected to a potentially avoidable hospital admission.

"There are also tests where there is no value, or limited value," said Weingarten. "If you take an otherwise perfectly healthy person and do carotid ultrasounds, the data suggests that's not going to help an asymptomatic, otherwise healthy patient. And it's going to cost money without providing benefit.

"The EHR can provide benefits in real time in that it can share information with the provider," he said. "After the fact, data is available to see how many doctors have prescribed low-value tests or treatments in comparison to your peers. When you give providers comparative information … they often respond by reducing their prescribing of low-value care."

Further elevating EHR's importance is increased interoperability, which enables different EHR systems to communicate with one another. This allows for a freer flow of information between providers, which is of prime importance when it comes to clinical quality and patient satisfaction.

"EHRs can all talk to each other, similar to ATMs," said Weingarten. "Anywhere in the world, I can withdraw money from an ATM … because the ATM that I intend to withdraw money from is interoperable with my bank. There was one time I was in a remote area in Argentina, hiking, and I came across a small town and was able to withdraw money from my bank in Los Angeles. So, there was that interoperability -- this ATM in Argentina knew I
had money to withdraw from my bank. That's the benefit, when you can communicate patient information between different EHRs."

This is not just a rosy picture, of course, and there are differing degrees of interoperability, as each EHR system is slightly different. That makes communication between systems difficult at times, but Weingarten said that things have improved in this area in recent years.

"We haven't achieved an endpoint yet, but my sense is things are going in the right direction."

That end should encompass quality care, safer and more affordable care, and enabling provider satisfaction -- in other words, selecting a system that facilitates the day-to-day work of the provider rather than slowing them down.

The successful switch to a value-based framework depends on it.

"I think we'll continue to see a progression of value-based care," Weingarten said. "Providers who deliver the best care at the lowest cost and provide the best patient experience will grow and thrive, and those provider organizations that do not provide high-value care are going to struggle."