

Iowa Chapter of Health Information and Management Systems Society

Chapter Meeting - January 18, 2017

I Just Want a Global View of my Patient! - Reaching Patient Data Interoperability

Presented by: Jim Green, ICE Technologies, Inc.

In many instances today, you have patient data residing in multiple systems (in your acute EHR, your ambulatory EMR, PACS system, Home Health application, etc.). But how easy is it to get a whole picture of a patient's health? Can you get a global view of what's happening with respect to the care and treatment that's being prescribed? If you could, would it change the way you deliver care? As healthcare is beginning to move beyond meaningful use compliance, there exists an opportunity like never before to have access to the complete record of care, and understand the big picture view of a patient's health.

During this session participants will:

- Learn of the struggles healthcare providers face in sharing data across the care delivery system that makes up a patient's treatment
- Understand the ways some are finding to solve these issues and provide their care teams with the complete care picture
- Discover and discuss the approaches to patient data interoperability and see examples of success

Jim Green has over 20 years of experience in developing, managing and implementing information technology strategies, projects, and solutions in the Health Care and other industries. Jim is a graduate of the University of Nebraska, BA in Business Communications, Economics and has his Master of Public Administration from Drake University. He serves as the CIO for ICE Technologies' clients, community hospitals. Jim is also a six sigma greenbelt and is named to the College of Healthcare Information Management Executives (CHIME).

Value-Based Reimbursement: Preparing for the Paradigm Shift

Presented by: Jim Tufts, ICE Technologies, Inc.

In an effort to accelerate the transition to value-based care, the U.S. Department of Health and Human Services set a goal for 50% of Medicare payments to come from alternative payment models by 2018. There is clearly a push toward value-based care, being driven in part by the CMS strategies to shift reimbursement from fee-for-service to value-based reimbursement. This is a complete paradigm shift for healthcare reimbursement. Knowing what value-based reimbursement looks like is one thing, but successful and timely navigation of people, process and

Location

Grinnell College

Joe Rosenfield Center Room 101 115 8th Ave Grinnell, IA 50112

Driving Directions

From I-80:

Take exit 182 to Highway IA-146 and head North toward Grinnell Turn right onto 6th Ave Turn left onto East St Take 1st right onto 8th Ave *There is free visitor parking in the lot on 10th Ave (North of 8th Ave)

Agenda

2:30 pm

Registration, Exhibitors
Welcome, Introductions
Session
Break
Session
Lunch
Session
Break

3:45 pm Closing Remarks and Door Prizes

Session

ı



Intended Audience

All Healthcare IT Professionals, Doctors, Nurses, Providers, Payers, Clearinghouses and Business Associates who use or enable use of information technology to support healthcare delivery.

Hotels in Area

Country Inn & Suites 1710 West Street South Grinnell, IA 50112 641-236-9600 Rate: \$109 + tax

Ask for Iowa HiMSS room block



Program Objectives:

- Discover and discuss the approaches to patient data interoperability and see examples of success
- Identify how you can use and lean methods to transition effectively to value-based reimbursement, and at the same time add value to the patient while reducing wasted steps
- Understand the major drivers of change facing managed care and how they affect the way data is captured, used and evaluated
- Define data governance and its role in organizational transformation
- Illustrate the benefits of predictive analytic to focusing on key populations

Chapter Meeting - January 18, 2017

technology changes is the challenge. Join this live presentation on what the various forms of value-based reimbursement are, and learn some foundational steps to take that will be necessary in preparing your organization for this healthcare paradigm shift.

During this session participants will:

- Learn the different value-based reimbursement strategies and programs that exist today
- Understand the depth and breadth of the changes needed in the care delivery system for this new reimbursement model
- Discover examples of value-based reimbursement successes and failures
- Review the CMS program requirements as well as what is needed to change your organization to support the value-based care system
- Identify how you can use and lean methods to transition effectively to VBR, and at the same time add value to the patient while reducing wasted steps
- Receive clear and actionable steps to take to prepare your organization for this paradigm shift

Jim Tufts has over 30 years of IT experience, 13+ of those are within healthcare. Jim has a degree in Computer Programming and many years of technical and industry training. He has been involved in more than 50 implementations in multiple industries, and has provided a variety of services including user education, consulting, and process improvement and reengineering. Jim has been with ICE Technologies since 2008. At ICE Technologies, Jim was a Health IT consultant for 7 years helping clients with strategic IT planning, HIPAA Security Rule compliance, and is considered an expert in DR planning in both the healthcare and financial industries. Since early 2015, Jim has been leading ICE's Health IT Consultants in their CIO engagements with clients in his role as Leadership Solutions Team Lead. Jim has been a presenter at conferences such as Becker's HIT/CIO Summit and various hospital association leadership forums and seminars.

Transforming Your Clinical Data into Actionable Analytics! How Analytics are Providing a Framework to Address the Major Drivers of Change

Presented by: John Frownfelter, M.D. CMIO, Physicians Executive and Information Builders Consultant

Healthcare organizations struggle to improve patient outcomes and enhance care quality, while controlling costs and maximizing reimbursements in order to maintain a profitable enterprise. Additionally, they are forced to comply with constantly-evolving regulatory requirements. Organizations in the US are significantly challenged to adopt new delivery models that support changes in healthcare delivery. These changes are driven by a need to manage care across the care continuum and through changes in how health care services are reimbursed. This is influencing significant evaluating of how data is captured, used, and evaluated. Data Analytic tools can provide the necessary framework needed for healthcare organizations to adapt to these major drivers of change.

Chapter Meeting - January 18, 2017

During this session participants will:

- Understand the major drivers of change facing managed care and how they affect the way data is captured, used and evaluated
- Learn how business intelligence and analytics are being used to improve patient outcomes and enhance quality of care
- Hear examples of how analytics are helping to control and reduce cost of care while maximizing reimbursements

John Frownfelter, MD is the CMIO at Amati Health. He has over 20 years of experience in areas including health information systems, transformation of care, clinical quality improvement & safety, and population health. Dr. Frownfelter has held a number of medical, medical information, and medical informatics leadership positions over nearly two decades, including Medical Director at Salvation Army Harbor light, and later CMIO at both the Henry Ford Health System, and Unity Point Health. Dr. Frownfelter has also held professorships at St. George's University and Wayne State schools of medicine, and the University of Detroit Mercy Physician Assistant School. Dr. Frownfelter received his MD from Wayne State University School of Medicine.

Data Governance (Current to Future State Planning) and Data Analytics (ACO Focus)

Presented by: Katie Tunning and Steve Palmersheim, University of Iowa and Shirley Gusta, Genesis Health System

Continuing Education Units

The Family Planning Council of Iowa is Iowa Board of Nursing Approved Provider, No. 262. Upon completion of this program participants will be awarded XX contact hours. The IBON requires that a participant attend in full for CE credit. Partial credit may be awarded in extreme emergency circumstances.

This program has been approved for XX continuing education unit(s) for use in fulfilling the continuing education requirements of the American Health Information Management Association (AHIMA). Granting prior approval from AHIMA does not constitute endorsement of the program content or its program sponsor.

CPHIMS CEUs, complete the form posted on the IA Chapter HIMSS web site and submit for CEU credit.

The certificate of completion provided to attendees following the conference will serve as verification for RHIA and RHIT.

The goal of this session is to define data governance and its role in organizational transformation.

The goal of the session is to describe the process and lessons learned of building a longitudinal medical record across multiple data sources for retrospective and predictive analytics. The focus will be on the University of Iowa Health Alliance Accountable Care Organization (UIHA ACO) efforts to meet the Triple Aim for value based contracts through data.

During this session participants will:

- Define data governance and its role in organizational transformation
- Discuss attributes of an effective data governance structure
- Describe critical data governance components and processes
- · Identify the steps needed to ensure engaged executive leadership involvement
- Provide background and build appreciation for the complexity of normalizing data across multiple systems and multiple institutions
- Discuss the benefits of risk stratification across populations
- Illustrate the benefits of predictive analytic to focusing on key populations

Katie Tunning graduated from the University of Iowa with a BS in Industrial Engineering and a MBA. She is currently the manager of Reporting & Analytics at the University of Iowa Hospitals and Clinics. She has been with U of I Hospitals and Clinics since 2004. Katie has extensive experience and knowledge in Data Governance and has worked to provide leadership in the development of system and programming standards.

Steve Palmersheim is an innovative thinker that applies a wide range of skill sets to look at problems from multiple angles. His past work experiences and education have given Steve a robust skill set and vast knowledge of financial planning, accounting principles, tax, lean practices, leadership, strategy, and big data manipulation. In his current role, Steve is able to utilize his skills to assess performance for value based contracts including Medicare Shared Savings Programs and other Accountable Care Organization (ACO) risk contracts. Steve currently leads a team of individuals in charge of developing quality and financial reporting for multiple hospitals and physician groups. In his past roles, he developed expertise in SQL, Tableau, Microsoft Excel,

Iowa HiMSS Board

President

Karmen Dillon, University of Iowa Health Care

President-elect

Bill Coddington, UnityPoint Health

Past President

Joy Selleck, Mercy ACO

Secretary

Denise Graftt, University of Iowa Health Care

Treasurer

Nicholas Dreyer, University of Iowa Health Care

Vice Treasurer

Cassy Freedman, University of Iowa Health Care

<u>Vendor Relations (Sponsorship)</u>

Steve Weimer, Commvault

Vice Sponsorship Chair

Douglas Johnson, MoreDirect

Membership/Outreach Chair

Emmanuel (Manny) Acheampong, Mercy ACO

Membership, Advancement and

Professional/Academic and Student Liaison Teresa Franklin, University of Iowa Health Care

Director of Marketing and

Communications

Stephen Stewart, TruBridge

Advocacy Liaison

Cody Zoss, Mercy ACO

HIE Liaison

Susan Brown, Telligen

Director of Programs

Shirley Gusta, Genesis Health System

Vice Program Chair

Veronica Brattstrom, PSIC

Web Chair

K. Lucas Meyer, University of Iowa Health Care

Social Media Chair

Ambrish Sharma, Access Community Health

SAS and other BI tools to manipulate EMR and Claims data. Today, Steve continues to use the tools to support Populations Health initiatives but also teach the techniques to staff and other individuals that spam across his organization.

Shirley Gusta is the Director of Business Intelligence at Genesis Health System, in Davenport, Iowa. In this relatively new role, she has managed the transition of a team of analytical and statistical experts into the Business Intelligence Center team, with the mission "To Improve the Quality and Availability of Essential Information". She has worked in Healthcare Information Technology for over 30 years, at Genesis, and most recently held the positions of IT Manager of Client Services and IT Manager of Application Services. During her career, she has had responsibility for project management, numerous healthcare technology deployments, including EMR implementations within both the Acute and Ambulatory settings and managing the IT customer services teams toward service excellence. At Genesis she serves as a member of the Executive Operations Council, the Leadership Development Institute Committee, the Performance Excellence Task Force and represents Genesis on the UIHA Data Management Committee. She has been a Health Information Management Systems Society (HIMSS) member since 1986 and a member of the Iowa HIMSS Program Committee since 2012. In July 2015, she began serving on the HIMSS Board, as the Program Committee Chair. Shirley received her BSN from Marycrest College, in Davenport, Iowa and has begun pursuing her Masters in Information Technology Management, at St. Ambrose, University. Shirley resides in Eldridge, Iowa with her husband Ron

Thank you to our sponsors:





