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## **Firm aims to boost health data upkeep**

Electronic system being tested locally

**By Craig Wolf**

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If efficiency and technology ever prove to be the salvation of America's health care finance system, the mid-Hudson Valley will be able to claim some extra credit.

The thesis that better coordination in a connected web with free-flowing information can cut costs and speed care is being tested now, right here, and you may even be a part of it without knowing.

"We're smack in the forefront in a lot of what we're doing, to evaluate on a cost basis, quality basis and return on investment basis," said Dr. John Blair, who heads the Taconic Health Information Network and Community, based in Fishkill, which is setting up electronic systems.

"We're one of the communities in the country that will be coming up with these answers," Blair said.

"It's not just to curb costs and create efficiency but to improve safety and quality," Blair said.

Saturday, people interested in the future of health care will gather at Dutchess Community College in a National Issues Forum titled, "Examining Health Care: What is the Public's Prescription?" It's a day-long free session for the public that will look at three broad paths.

One of them holds that the best way to improve health care is to "make it run like a true, well-coordinated system," fashioning a connected web out of an "un-wieldy collection of health care fragments." Key to this is creating a free flow of information. That, the theory goes, will cut costs and improve care.

### **Many still uninsured**

All of those ideas are good, said Arthur Weintraub, recently retired as head of the Northern Metropolitan Hospital Association. But it's not the whole picture, he said.

"I wouldn't want to diminish any of them, but I would think that in addressing the ills of the American health-care system there are some broader and more far-reaching policy directions that need to take place," Weintraub said.

Washington's efforts at remaking health care "places an ever greater burden on individual consumers," he said.

"The broader concern I have is the effort to cap federal financial responsibility for some very complex health care needs, not the least of which is the 45 million Americans who remain without health insurance," Weintraub said.

Blair said the two approaches can work together: "I don't know why one would preclude the other."

He said the uninsured have to be brought in, and that the cost of that can be aided by savings from efficiency.

The network built so far in the mid-Hudson by Taconic consists of five hospitals in Dutchess and Ulster counties, two laboratory companies, more than 500 physicians and more than 1,000 office staff members.

"We're now starting to deploy full electronic health records. We have half a dozen practices ... That's just the beginning," Blair said.

Electronic prescription writing is being deployed now.

"That does a lot of checking against other records," Blair said, "and electronically ties them into the pharmacy."

IBM Corp. is working on a federally funded project to provide the infrastructure for linking up pieces of the system in collaboration with Taconic.

Just how good the system is will be evaluated from three perspectives, Blair said. Next year, data will be available on patient safety, errors and the like. Quality of care will be evaluated in a couple of years, and financial effects will be figured over the next five years.

Digitizing the medical world will likely bring efficiency as it has elsewhere, but there are risks to privacy and security.

The Government Accountability Office reported recently on electronic systems in use by the Department of Health and Human Services that "significant weaknesses in information security controls" increase the risk from those who would "inadvertently or deliberately disclose, modify or destroy" sensitive data, the office said, according to a report in USA Today.

But department officials responded, the paper said, that recent improvements had buttoned up a lot of the holes.