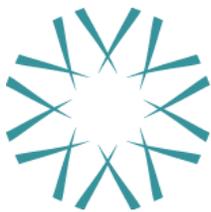


Sourcebook

Technical Assistance of the Rural Health Information Technology Network Development (RHITND) Grantees

July, 2014



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This is a publication of the National Rural Health Resource Center. The project described was supported by Contract Number HSH250201100027C from the U.S. Department of Health and Human Services, Health Resources and Services Administration, Federal Office of Rural Health Policy.

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RHITND SOURCEBOOK PURPOSE

The Rural Health Information Technology Network Development (RHITND) Program provided funding during Federal fiscal years 2011-2013 to forty-one rural health network grantees. The RHITND Program was funded by the Federal Office of Rural Health Policy (FORHP). The HIT focus of the RHITND Program is to develop rural health networks that support their members in the adoption of EHR platforms and supporting HIT so that eligible hospitals and providers are able to attest to MU rules and guidelines. To accomplish this the RHITND Program also focused on developing robust and viable rural health networks to support their members in addressing challenges to meeting MU standards of EHR adoption and effectively utilizing HIT.

The objective of the RHITND Sourcebook is to provide a reference and resource document showcasing each RHITND grantee to tell the story of the RHITND program and provide a means for the grantee networks to share insights and continue building connections between networks. This sourcebook has been prepared by The Center, through a contract for TA from FORHP.

To meet these objectives the sourcebook is designed as a two-part document comprised of a narrative PDF document and a searchable Microsoft Excel spreadsheet. The intent of this design is to provide the user with the ability to easily filter and search the spreadsheet for specific network characteristics, and then refer to the narrative for an illustration of who the network is and accomplishments. For example, if a grantee wanted to search other networks with critical access hospitals (CAHs) as members for promising practices in network development, they may filter the "Highlight Practices and Lessons" tab in the spreadsheet for "Network Development" and see if any of the matching network have "CAH" members and easily pinpoint a matching network. Furthermore, they may then find more detail on the network including types of Health Information Technology (HIT) professionals and network contact information. The user may also access additional information on the desired network in the PDF narrative document.

Most importantly, the searchability of the sourcebook gives users the ability to reach out and contact any of the networks to discuss their particular lessons learned, promising practices, and additional information. The promising practices and lessons learned categories for the networks were further refined by the RHITND technical assistance (TA) team to allow users to sort and filter based on the particular information of interest. The categories were established by discovering common themes among the data, as well as pulling from themes used throughout the duration of the grant.

RHITND SOURCEBOOK METHODS AND INFORMATION

Information published in the sourcebook was gathered from the RHITND grantee applications, the grantee submission of data through Performance Information Management System (PIMS), grantee input through network assessments conducted by the The Center RHITND TA team throughout the RHITND program. The table below illustrates where each type of information is located within the spreadsheet and/or document and where the information was derived from.

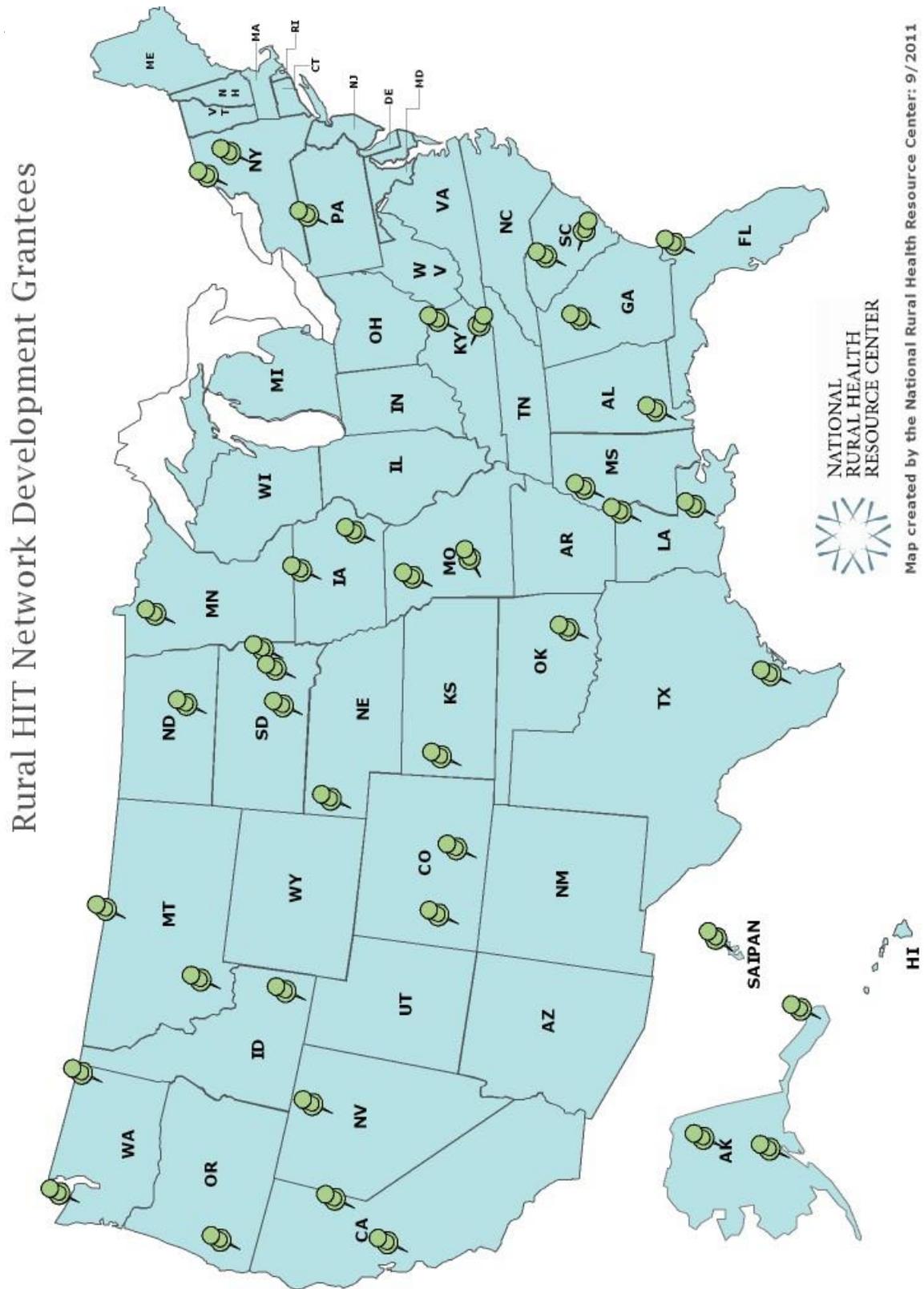
Information Type	Narrative Document	Sort & Filter Spreadsheet	Information Origin
RHITND Sourcebook Purpose	X	X	Created by The Center
Methods and Information	X	X	Created by The Center
RHITND Program Overview	X	X	Created by The Center
RHITND Grantee Map	X		Created by The Center
RHITND and HTI Glossary	X		Created by The Center
Network Description	X		Grant Application (2011)
Types of Network Members	X	X	PIMS (2014) & Network Assessment (2014)
Network Objectives	X		Grant Application (2011) & Network Assessment (2014)
Network Mission/vision	X		Grant Application (2011) & Network Assessment (2014)
Promising Practices	X	X	Technical Assistance & Network Assessment (2011 – 2014)
Lessons Learned	X	X	Network Assessment (2014)
Sustainability Plans	X		PIMS (2014)
Contact information	X	X	Network Assessment (2014)
Network URL	X	X	Network Assessment (2014)
Types of Health Facilities		X	PIMS (2014)
HIT Platforms		X	Network Assessment (2014)
Types of HIT staffing		X	PIMS (2014)
Types of HIT training		X	PIMS (2014)

RHITND PROGRAM OVERVIEW

The RHITND Program provided funding during Federal fiscal years 2011-2013 to forty-one rural health network grantees (Figure 1). The RHITND Program was funded by FORHP. The Program is authorized under the Public Health Service Act, Section 330A (f) (42 U.S.C. 254(c) (f) and was created through the American Recovery and Reinvestment Act of 2009 (ARRA or Recovery Act) which was signed into law by President Obama on February 17, 2009. The law established, under the Centers for Medicare & Medicaid Services (CMS); Health Information Technology for Economic and Clinical Health (HITECH) Act. The HITECH Act and subsequent rule making by CMS established standards for qualifying for the CMS incentive payments and a method for attesting to meaningful use (MU) of electronic health record (EHR). CMS designed a phased approach to implementing MU which consists of the following stages: Stage 1 requires digitization of health records, Stage 2 expands this digitization to quality measurement, clinical decision support and information exchange, and Stage 3 to improving health outcomes for both patients and populations.

The HIT focus of the RHITND Program is to develop rural health networks that support their members in the adoption of EHR platforms and supporting HIT so that eligible hospitals and providers are able to attest to MU rules and guidelines. To accomplish this the RHITND Program also focused on developing robust and viable rural health networks to support their members in addressing challenges to meeting MU standards of EHR adoption and effectively utilizing HIT. Strong rural health networks support their members in addressing a number of health issues including, increasing: chronic illness due to an aging population, high poverty rates, low education levels, substantial numbers of uninsured persons and high dependence on public insurance. Additionally, rural health networks seek to address challenges of EHR implementation. These challenges include lack of access to HIT expertise and funds to expand services and update existing infrastructure. One of the promising aspects of rural health networks is their inherent design to create and nurture relationships within the network and between strategic partners. The values of rural health networks' collaborative nature include shared knowledge and solutions, significant purchasing power and increased influence to their customers and partners. The expectation of a successful RHITND network is to improve overall access to care in their communities, implementation and utilization of effective HIT, creative problem solving for new models of care and addressing the desire for the highest level of health care quality.

Figure 1. RHITND Grantees, 2011-2014



RHITND AND HIT GLOSSARY

AHEC	Area Health Education Center
ARRA	American Recovery and Reinvestment Act
CAH	Critical Access Hospital
CHC	Community Health Center
CMS	Centers for Medicare & Medicaid Services
EHR	Electronic Health Record
FORHP	Federal Office of Rural Health Policy
FQHC	Federally Qualified Health Center
HIE	Health Information Exchange
HIT	Health Information Technology
HITECH	Health Information Technology for Economic and Clinical Health
HPSA	Health Professional Shortage Area
IT	Information Technology
MU	Meaningful Use
MUA	Medically Underserved Area
ORHP	Office of Rural Health Policy
PIMS	Performance Improvement Measure System
RHC	Rural Health Clinic
RHITND	Rural Health Information Technology Network Development
TA	Technical Assistance

RHITND HIGHLIGHTS SUMMARY

Through data collection and direct TA The Center identified categories of RHITND grantees' lessons learned and promising practices. Following is a highlights summary of the five most prevalent categories based on the number of activities of the grantees including: Collaboration, Sustainability, Leadership - project management and planning, HIT, and Network Development. The summary provides a description and highlights lessons learned and promising practices. The chart below (Figure 2) includes a complete list of categories. All lessons learned and promising practices are available in the Sourcebook Spreadsheet.

Collaboration emerged as the number one topic of lessons learned and promising practices throughout the duration of the grant. Over 20 percent of both lessons and practices were collaborative in nature.

Lessons Learned:

- Learning the importance of networks
- Creating efficiencies throughout a network
- The ease and importance of communicating via a network
- The ability to engage peers and share findings through a network

Promising Practices:

- Collaboration with HIE work
- Leveraging resources to increase community, patient and network engagement
- Creation of collaborative business models and educational or informational cohorts
- Using collaboration to help advocate for rural health policy issues

Focusing on sustainability was another major theme that emerged among both lessons and practices; it weighed in at almost 16 percent.

Lessons Learned:

- The idea of systems thinking and the time and effort it takes
- Strong leaders have a great impact on sustainability
- Creating a vision and remaining consistent is key to goal achievement

Promising Practices:

- Having a proactive business planning model
- Developing sustainable products and services
- Focusing on value creation for members
- Having clear leadership paired with active participation

Leadership - project management and planning also came in as an important theme for both lessons and practices; this category made up almost 15 percent of lessons and practices.

Lessons Learned:

- Involving all parties, from the bottom to the top, is critical
- Customized work plans sometimes work best for specific members
- Over communicating is not possible, but it is something to strive for
- Being flexible when things are being released is important, so be patient and keep trying to accomplish the end goal

Promising Practices:

- Including a CMIO within the leadership teams
- Successfully achieving grant goals by having clear work plans
- Effective project management and dedication to the goals
- Working through leadership turnover and not letting it ruin the end goal

HIT was another major category of lessons learned through general experience. About 11 percent of the total lessons and practices were in general HIT, which includes those specific to information exchange or data warehousing analytics.

Lessons Learned:

- Achieving MU takes a great amount of time, effort and focus
- Even if it is difficult, it is important to stay current
- If a provider is not eligible for incentive payments, it is harder to engage them to take part in MU
- Other non-EHR related activities could become more difficult once the EHR was in place

Promising Practices:

- Increased connectivity through HIEs
- Research on active data analytics
- Proactive efforts in data warehousing
- Creative efforts for care coordination and population health

Network development was the final category that emerged. This was defined in terms of product and service creation to help the development of their networks. Approximately 11 percent of lessons and practices fell into this category.

Lessons Learned:

- Sharing resources and fostering sharing was key

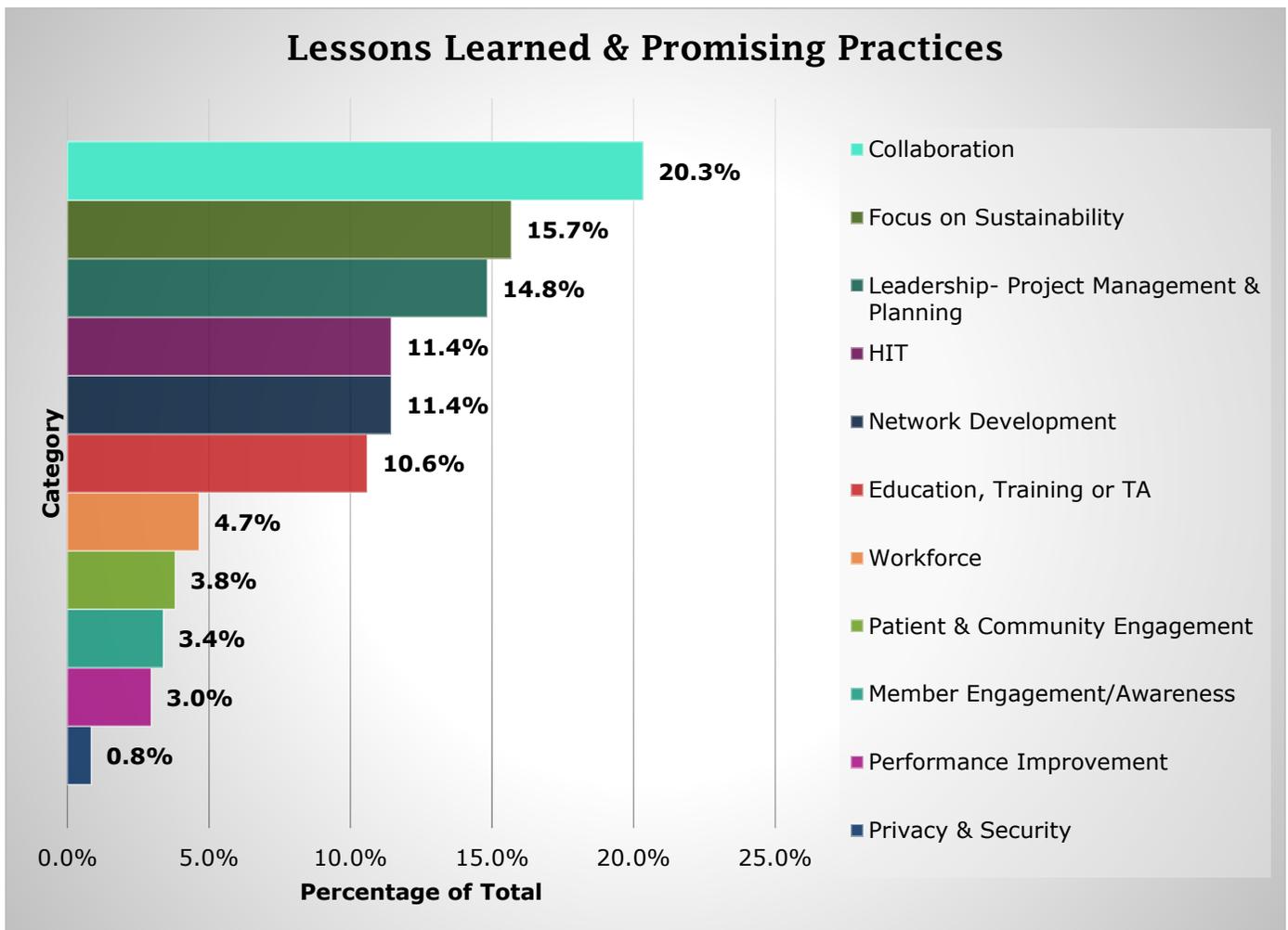
- Generating products and services for the network to utilize is extremely important to developing the network

Promising Practices:

- Contract and vendor negotiation best practices
- Developing solutions for data analytics and population health
- Possessing strong products and services that contribute to a high functioning network

There were many other lessons learned and promising practices found throughout the program such as education, training or TA, performance improvement, workforce, privacy and security and others. A chart of these can be found below (Figure 2) and a more comprehensive list of all lessons learned and promising practices may be found in the Sourcebook sort and filter spreadsheet.

Figure 2. RHITND Grantee Highlights



ALABAMA

North Baldwin Health Network

North Baldwin Infirmary Hospital

Network Description

The network is comprised of providers along a continuum of care in rural north Baldwin County, Alabama. They are a vertical network comprised of a variety of care entities including: an acute hospital, emergency, primary, specialty, mental health, home health, long term nursing and hospice. The county's total population is 171,769 with 10% of the population below the poverty line.

Network Objectives

Mission: The network and its members reflecting the needs of their community, acting with available resources and consistent with agreed upon strategic priorities will: promote clinical integration, achieve healthy status improvement and facilitate administrative integration.

Vision: Working together so their communities are the healthiest in America.

Goals & Objectives:

- Promote clinical integrations by care coordination efforts, ensure a timely and accurate EHR and provide clinicians with secure access to data.
- Continually improve the general health of the communities they serve by elimination of medical mistakes and increases in quality care.
- Maintain a financially viable network by accepting and managing financial risk and taking a leadership role in health care public policy.

Highlights

Promising Practices:

- Utilized various technology platforms to support physician education and patient engagement, including apps for physicians and the implementation of a patient portal to gear their consumers to be active participants in their health care.
- Leveraging the member's existing resources to help engage their communities.
- Taken advantage of the use of HIT training for their professionals, including the use of seminars and webinars.
- Established a health care academy for students interested in HIT to address recruitment and retention.

Lessons Learned:

- Limited local expertise levels required them to develop their workforce from outside of community and realized the increased value that comes from it even with the added cost.
- Full acceptance of the new technology has been more difficult for those providers closer to retirement and who lack sufficient resources to implement all the components needed.
- There is an increased awareness and understanding of the importance of exchanging information particularly in order to improve care transitions.
- A lack of consistency in resources is still a big challenge in developing sustainable network activities.

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

Contact

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ALASKA

ASHNHA Small Hospital Network

Alaska State Hospital & Nursing Home Association

Network Description

The network is a privately owned member supported telehealth network. Their members are small, rural and remote hospitals and clinics across Alaska. Their focus is increasing access to care in these areas by using various technology and connectivity strategies. Many of the areas they serves are designated as HPSAs and MUAs.

Network Objectives

Mission: To provide its members with access to modern telecommunications capabilities and medical equipment and specialty physicians to provide a broader range of access to improved health care services for the communities and residents served by the member facilities.

Vision: To be the premier provider advocate bringing unity to the health care community in addressing health care issues and to support our members' goal to improve Alaskan's health.

Goals & Objectives:

- Advance a health care delivery system that improves health and health care in Alaska
- Facilitate collaboration among small and rural hospital members
- Optimize the organizational effectiveness of ASHNA and its members
- Enhance efforts to increase member engagement

Highlights

Promising Practices:

- Proactive with state level HIE and collaboration between members
- Funding IT and nursing leadership trips to other facilities
- Implementation of a successful EHR system network that meets monthly to discuss a variety of topics including: joining the HIE meaningful use, and privacy and security

Lessons Learned:

- Sharing leadership positions when some facilities lose staff is helpful, such as sharing a CIO across facilities
- Being proactive when seeking TA can be useful to problem solving

- Seeking input from others on business model development was insightful

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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ALASKA

Interior Regional Health Network

Tanana Chiefs Conference

Network Description

The network represents 31 primarily Alaska Native communities within the interior area of Alaska. The communities are in frontier, rural and extremely isolated areas, and the service area covers more than one-third of Alaska's entire land mass. Most communities are not accessible by road and can only be reached by various other methods depending on the season. They describe themselves as having a formal network with three primary members including the Tanana Chiefs Conference, Council of Athabascan Tribal Governments and the Tanana Health Center.

Network Objectives

Mission: The purpose of the Interior Regional Tribal Member Health Network is to improve communication flow among the health center Network providers in the Network, increase access to a higher level of health care, improve patient safety and reduce health care costs.

Vision: The vision of the Interior Regional Tribal Member Health Network is local access to high quality health care and effective collaboration and coordination between providers for all Alaska Natives living in the interior of Alaska.

Goals & Objectives:

- Improve safety and quality of care by reducing medical errors through instant access to a patient's medical and medication history and by coordinating and streamlining care for chronic disease management as well as for age-appropriate screenings
- Increase access to a higher level of care as medical providers in regional and sub-regional clinics will be able to review patient medical history and support physician decision making no matter where the patient receives services

Highlights

Promising Practices:

- Conducting field training even in their very remote sites
- Possess a lot of business continuity
- A developed outside support system has been very useful

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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ALASKA

Rural Anchorage Service Unit (RASU) Rural Health IT Network **Alaska Native Tribal Health Consortium**

Network Description

The network describes themselves as a network within a larger vertical network called the Alaska Tribal Health System. The members include clinics and other tribal organizations. The clinic members are small, non-CHCs and are all typically great distances from other health care delivery sources. However, most of the facilities are on the road system.

Network Objectives

Mission: Support RASU members in their endeavor to improve their health care services through the use of electronic health records and other health information technology.

Vision: 100% of all RASU members will have access to an electronic health record and health information exchange and will meet MU of HIT measures. The members each have a vision to make the Alaska natives healthy and provide premier, unified health information technology.

Goals & Objectives:

- Enable providers to exchange information about their patients to all levels up the chain of care by connecting the EHR to the Alaska HIE
- Provide high quality health services
- Provide exceptional support services

Highlights

Promising Practices:

- Working with laggard, small, remote clinics to get training in
- Part of an advanced HIT network

Lessons Learned:

- Convincing providers to routinely use EHRs is a very long ongoing laborious effort
- Not everyone is HIPAA Security Management compliant, which is a MU objective
- Understanding and achieving MU measures is very difficult as they are being developed/changed along the way

- Create a customized plan for each network member
- Finding qualified HIT people anywhere can be challenging

Sustainability Plans

This network does not plan to sustain after grant funding. They reported that they would not continue network-sponsored HIT training; however, they would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

Contact

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CALIFORNIA

California Rural Health Information Technology Network (CAREHIN)

Tahoe Institute for Rural Health Research

Network Description

The network has a service area that covers 18 counties through California that contain prevalent cultural diversity. They have 15 members and are primarily a CAH network combined with their outpatient providers. Fourteen of the member communities are designated as HPSAs and nine are also MUAs.

Network Objectives

Mission: To provide assistance and overcome barriers for rural communities to achieve the meaningful use of EHRs, and to assist rural communities in using HIT to improve the quality, efficiency and patient-centeredness of care.

Vision: By using technology, process improvement, patient engagement and informatics we can improve access, reduce costs and eliminate the disparities in outcomes between rural and non-rural settings.

Goals & Objectives:

- Assist rural communities to become meaningful users of EHRs
- Build a robust informatics program to improve rural population health and prepare our rural communities to achieve the triple aim of CMS to improve the patient-centeredness, quality and efficiency of care
- Support providers in all rural communities
- Foster the deployment of EHRs, community HIE and secure clinical data repositories to improve efficiency, wellness, prevention, chronic disease management and better patient outcomes

Highlights

Promising Practices:

- Data repository on transitions of care. This has helped drive down member costs, increase access to cost effective service and knowledge resources
- Always forward-looking: proactive business planning and sustainable service creation
- Workflow process and redesign

Lessons Learned:

- Other efforts have indirectly had a positive impact on IT-workforce scarcity

- A lot of maintenance is needed to keep current and successful
- “Systems thinking” takes a good deal of time
- Member decision making remains to be very disjointed

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training, but would not continue to support the maintenance of the EHR system that was previously supported by the grant funding.

Contact

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CALIFORNIA

Central Valley Collaborative (CVC)

Livingston Community Health Services, Inc.

Network Description

The network is characterized as an FQHC network with five participating members. The FQHCs combined operated 45 medical facilities that served approximately 219,671 registered patients in 2010. The service area is in rural communities from the northern end of the San Joaquin Valley in California to the southern end of the Central Valley of California. This encompasses five counties that are all located in HPSAs and/or MUAs.

Network Objectives

Mission: The mission of the Central Valley Collaborative information technology network is to improve the efficiency, effectiveness and safety of health care for low income and medically underserved populations, including the uninsured and underinsured residing in the targeted service areas.

Goals & Objectives:

- Enhance safety net providers' capacity to measure and effectively report on the quality of care and the health outcomes in health centers
- Reduce health care costs that result from inefficiency, medical errors, inappropriate care and incomplete information
- Increase the availability and transparency of information related to the health care needs of the patient and support physician decision making
- Support the ability to provide a rapid response to both natural and man-made disasters, including those due to bioterrorist acts
- Further develop continuity of care across settings for health center and for other safety net patients as they move from outpatient to urgent, emergency and inpatient care

Highlights

Promising Practices:

- Development of unique and educational programs
- Partnering with education facilities to achieve goals of training and education on HIT for staff
- Bringing value to network members with network shared staff models
- Possess a CMIO within their leadership

Lessons Learned:

- Success will help build trust within a network
- It works best to over communicate
- Stay focused on what you do best

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

Contact

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COLORADO

Data Services for Healthcare (DASH)

Huerfano County Hospital District

Network Description

This network serves communities in Colorado. The network assists providers and facilities in frontier, rural and urban underserved areas with affordable and sustainable use of HIT. Types of network members include: CAHs, rural hospitals, hospitals, clinics and long-term care facilities.

Network Objectives

Mission: DaSH is dedicated to reducing HIT disparities for rural and urban safety net facilities by providing access to affordable HIT solutions to improve infrastructure and provide high quality patient care.

Vision: DaSH's vision is for all rural and urban safety net facilities to have access to affordable IT services to provide high quality care to the underserved.

Goals & Objectives:

- Help rural providers throughout the state to use data effectively to improve patient outcomes, comply with federal regulations, meet MU and support data exchange at state and national platforms
- Decrease HIT disparities by improving access to best practices, which will in turn create financial savings for providers and facilities
- Provide common and centralized IT support services

Highlights

Promising Practices:

- Solving problems to make population management affordable outside the network
- Proactive efforts in business analytics to run a better business and support clinical decision making
- Data warehousing and analytics

Lessons Learned:

- Recruitment of skilled IT staff for rural and frontier areas can be challenging
- Marketing services requires consistent ongoing awareness building

- Meaningful Use achievement requires a team effort between the vendor, State REC technical assistance, and project advisors such as DaSH
- Reporting and data extraction is beyond the skill level and time availability for CAHs. Third party support is essential

Sustainability Plans

This network plans to sustain after grant funding. This network plans to sustain after grant funding by transitioning from subsidizing programs and services with grant funds to a fee for service model. This model has already been deployed with some success.

Contact

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COLORADO

Tri-County Health Network

Telluride Medical Center Foundation

Network Description

The network describes themselves as a vertical organization comprised of major health care stakeholders within a three-county region on the Western Slope of Colorado. The service area is officially designated as a HPSA and MUA, and the project focus was on primary care/prevention strategies. Member types including a FQHC, hospital, RHC, private practice and other.

Network Objectives

Mission: To improve the overall health and quality of healthcare in our rural region by identifying, developing and operating programs and initiatives that will reform the healthcare delivery system and payment methodology in rural communities while providing solutions to critical healthcare needs and health disparities.

Vision: Committed to improving the quality and coordination of health and healthcare services in the rural three county region of southwest Colorado by increasing access to healthcare and integrative health services at lower costs through collaboration and innovation.

Goals & Objectives:

- Improve population health outcomes at lower cost by leveraging resources and strengths of the network members
- Improve access to health care by enabling network providers to care for patients more efficiently and effectively

Highlights

Promising Practices:

- Great collaboration among network members IT staff that continue to help each other
- On the other hand, they also have many independent problem solvers
- Met and stayed committed to the objectives for the program

Lessons Learned:

- HIT is an ongoing, constantly changing and costly initiative
- We still have a lot of work to develop revenue generating products & services
- Never underestimate the importance of networking to move initiatives forward
- Allow a non-traditional flexible schedule in order to retain talent

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue to support the maintenance of the EHR system that was previously supported by the grant funding, but would not continue network-sponsored HIT training.

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FLORIDA

CommunityHealth IT Network

Rural Health Partnership of North Central Florida

Network Description

The network describes themselves as a vertical network of health care facilities and organizations that deliver and support patients care in rural Alachua, Bradford, Columbia, Dixie, Gilchrist, Hamilton, Lafayette, Levy, Suwannee and Union counties in north central Florida. Some of the service area is designated as a HPSA. They have a wide variety of member types including AHEC, CAH, FQHC, social services organization and many other.

Network Objectives

Mission: For all residents in our service area to have a medical home.

Vision: To work cooperatively to improve our residents' health and wellness through health promotion, disease prevention and accessible, affordable health care.

Goals & Objectives:

Assists its rural provider members in understanding the benefits, risks and opportunities of HIT adoption.

Highlights

Promising Practices:

- Exemplary patient engagement strategies from community and physician standpoint, including community HIE
- Contract and vendor negotiation best practices
- Have representation when policy makers are discussing future decisions.
- Possess a CMIO

Lessons Learned:

- Shared community patient portals can be used to help boost patient engagement.
- Regardless of how much an area hospital wants to participate in community-level HIT activities, if it is part of a national corporation, working together can be stalled or slowed

- Helping rural communities start and establish HIT projects can take much longer than 3 years, so it would be helpful if continuation grants were available

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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GEORGIA

Central Georgia Rural Health Alliance

Hospital Authority of Monroe County

Network Description

The network describes themselves as a vertically integrated network focused on primary care and wellness. The area they serve is Monroe County, Georgia, which is entirely a MUA and is also designated a HPSA in regards to low income/migrant farmworker. The population is around 26,424 with 13.5% sitting below 100% of the federal poverty level (FPL). The network has a smaller amount of members including the following member types: CAH, hospital, private practice and other.

Network Objectives

Mission: To use HIT to improve health and quality of life in rural Monroe Country, Georgia.

Vision: To be a “wisely wired” provider community in Central Georgia.

Goals & Objectives:

- Utilize network to facilitate network eligible hospitals and eligible providers in achieving MU
- Expand network to include new physicians in Monroe County
- Assist all provider partners in continuing to demonstrate MU as requirements change

Highlights

Promising Practices:

- Successes in achieving goals they put forth
- Strong efforts on information collaboration

Lessons Learned:

- Vendor neutrality has pluses and minuses. It helps get the partners the best system for their situation, but makes interoperability more difficult
- Sustainability has been difficult to maintain
- Objectives will work themselves out for the most part, but not always as expected

Sustainability Plans

This network plans to sustain after grant funding, but they also have expressed challenges in terms of sustainability. They reported that they would continue network-sponsored HIT training and would also continue to support the maintenance of the EHR system that was previously supported by the grant funding.

Contact

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IDAHO

Franklin County Healthcare Network Development Project

Franklin County Medical Center

Network Description

The network is located in the Southeast corner of Idaho. It is surrounded by the Rocky Mountains with a high mountain valley that is very rural in nature with 19 persons per square mile. The country is designated as a HPSA and has about 12,454 people total. Member types include a single CAH and four primary care clinics, and they describe themselves as being a vertical network.

Network Objectives

Mission: The Franklin County Healthcare Network will seek support from each other and outside sources for healthcare providers in Franklin County to:

- 1) Meet Meaningful Use criteria for all partners,
- 2) Guide partners in applying for Meaningful Use incentives, and
- 3) Improve patient care outcomes through the use of EHR systems.

Vision: Creating a network of support for the patient across the continuum of care.

Goals & Objectives:

- To determine the best EHR system for the doctors
- To ensure connectivity between the hospital and all four doctor clinics
- To ensure that all four doctor clinics meet year 1 MU criteria in 2012, year 2 MU criteria in 2013 and year 3 MU criteria in 2014
- To use MU criteria to drive improved outcomes

Highlights

Promising Practices:

- EHR systems allows for personalization for each entity which created continuity in every aspect of patient care
- Network members see the value of data exchange

Lessons Learned:

- There are many efficiencies created for each individual member by being part of a network
- Close communication with each member allows for situational adjustments to be made in short amount of time so that operational success is continual

- Working with vendors to provide sufficient user education eliminates inefficiencies naturally created by upgrades and additions

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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IOWA

Hawkeye Rural Health Network

Van Buren Hospital

Network Description

The lead organization is located in Keosauqua, Iowa, which is located in Van Buren County that has a population of 7,676 and is located in a HPSA. Member types include: CAH, hospital, FQHC and other. The organization is a network affiliate of the University of Iowa Hospitals and Clinics to provide oversight to ensure it complies with the CAH requirements.

Network Objectives

Mission: To establish a health information exchange to assist the health care providers enhance the quality of care offered to patients through the use of uniform patient data and achieve compliance with the stages of Meaningful Use.

Vision: To establish a health care information exchange network to ensure that patients receive the highest quality of health care across the continuum of care.

Goals & Objectives:

- Increase access to medical records among providers and increase record security
- Increase coordinated of medication reconciliation and care plans

Highlights

Promising Practices:

- Community engagement efforts have been successful
- A good example of smaller, rural facilities working with larger facilities to accomplish goals

Lessons Learned:

- Restructuring is sometimes necessary when members leave the network

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the

maintenance of the EHR system that was previously supported by the grant funding.

Contact

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IOWA

Wright Health Partners (WHP) Network

Iowa Specialty Hospital - Clarion

Network Description

The network is located in northern Iowa in Wright County, which has a population of 13,229. It is designated as both an HPSA and MUA. The network consists of two CAHs, an orthopedic specialty physician practice, family practice clinics and other.

Network Objectives

Mission: Wright Health Partners is committed to providing an exceptional health care experience.

Vision: Wright Health Partner's vision is to consistently exceed expectations by providing exceptional health care based on a balanced pillar approach encompassing service, quality, finance, people, community and growth.

Through teamwork, evidenced-based practices, fiscal responsibility, targeted growth and strong leadership, Wright Health Partners will achieve the highest level of satisfaction for customers, providers and employees.

Goals & Objectives:

- Insure optimum patient health care
- Provide timely education
- Secure patient health information

Highlights

Promising Practices:

- Integrations of IT Department with Informatics team into one department to support and provide continuity
- Successful in network development
- Project management is a strength
- Using a test environment which is kept current with Live EHR

Lessons Learned:

- Filling Informaticists positions have been difficult because of location and that it's a newer position
- It's important to stay current as possible with EHR releases, and communication and planning of the releases should be a priority
- It's better to train and teach an applicant who is otherwise less qualified, but eager to learn and committed to the network

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

Contact

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KANSAS

Western Kansas Frontier Information Network (WKFIN)

Greeley County Health Services

Network Description

The network serves the rural residents of far Western Kansas and Eastern Colorado along the border of the two states. Many communities are small ranching or farming communities with many generations in them. Network member types include CAH, RHC, health department, social services organization and other, such as long term care. The lead organization has been recognized as a rural health leader at local, regional and national levels.

Network Objectives

Mission: Western Kansas Frontier Information Network will strengthen our current relationships and ability to care for our patients through the creation and support of a secure and compliant information network.

Vision: Rural communities working together to improve the health of our residents and our communities through a continuous network of healthcare providers with information systems and the flexibility to adapt to the ever changing healthcare environment. Continue our role as rural healthcare leaders in the region and the state in an effort to share our experience with other rural health systems.

Goals & Objectives:

This Network proposes a transition to a comprehensive health information technology system which will link healthcare providers in the network across three counties.

Highlights

Promising Practices:

- Work with care coordination and transitions and expanding partnerships to support this focus
- A part of an advanced HIT network
- Use of web/cloud based tools for communication
- Have an experienced CIO and system administrator

Lessons Learned:

- You can never train or communicate enough - need to keep a constant stream of effort in this area
- Specific time and efforts are needed to facilitate network partner development

- A strong network director makes the difference

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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KENTUCKY

Knox County HIT Network

Knox Hospital Corporation

Network Description

The network serves people in rural Knox Country, Kentucky. The network members a CAH as the lead organization, a health center and a RHC. They describes themselves as a vertical network of diverse provider types to serve the people.

Network Objectives

Mission: To facilitate and coordinate the development of an interconnected, secure data sharing network in support of quality rural health care for the medically underserved and to assist providers in the alignment of local efforts with emerging state and national guidelines.

Vision: To provide the people of rural, southeastern Kentucky access to a full continuum of quality health services.

Goals & Objectives:

The goal of this project is to develop a cost-effective strategy for assisting health care providers in meeting meaningful use and thereby improving health care, patient safety and the efficiency of health care delivery in rural Southeastern Knox County, Kentucky.

Highlights

Promising Practices:

- Leverages technology to attract help from outside the area
- Brought diverse perspectives to the table to help efforts
- Having planned site visits to help articulate federal vision, as well as network vision

Lessons Learned:

- Be willing to change direction
- Have a good understanding of your particular environment
- Do not rely on grants to fund your organization

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the

maintenance of the EHR system that was previously supported by the grant funding.

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KENTUCKY

Northeast Kentucky Regional Health Information Organization (NeKY RHIO)

Northeast Kentucky Regional Health Information Organization

Network Description

The network serves 17 counties in Northeastern Kentucky which are all considered HPSAs in primary, mental and dental care, and 15 of those are considered to be MUAs as well. Many counties have greater than 20% of the population below the poverty level. This is a larger network with member types including some of the following entities: AHEC, CHC, CAH, FQHC, hospital, RHC, private practice and other.

Network Objectives

Mission: To equip the medical community of Northeastern Kentucky with the tools necessary to facilitate health information exchange for the purpose of improved continuity of care. They also hope to empower the citizens of Northeastern Kentucky with access to the patient information, cultivating a more actively involved community and increasing the overall health of the residents.

Vision: To create a future in which our region is served by a secure electronic health network to ensure that essential health information is always available to clinicians at the point of care.

Goals & Objectives:

- Support the continued adoption, implementation and upgrading process of electronic health records
- Allow health information to follow the consumer
- Develop interfaces for the connection of health information exchanges for eastern rural providers

Highlights

Promising Practices:

- Shared IT practices to centrally service their consumers
- Focusing on workforce issues spurred them to write for and receive the workforce development grant
- Significant collaboration and partnerships efforts

Lessons Learned:

- Always begin from the bottom, even if it seems unnecessary
- Never assume or expect individuals to know certain information
- There is always underlying reasoning for why individuals behave the way they do. Discovering that reasoning will help tremendously in maintaining good working relationships and will allow the network to progress

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training, but would not continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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LOUISIANA

Emergency Rural Health Information Technology Project (E-RHIT)

Louisiana Rural Ambulance Alliance, Inc.

Network Description

This network is made up of three members who are committed to rural ambulatory services. The members consists of ambulance services across Louisiana that participate in emergency and nonemergency care and medical transportation service. Something unique about this network is that it is the only ambulance network within the RHITND program.

Network Objectives

Mission: To support, facilitate, and establish an electronic health information technology opportunity for rural EMS providers that is driven by quality and supported by data.

Vision: To establish a network of engaged providers committed to improving access to information and better health outcomes for rural residents of Louisiana.

Goals & Objectives:

- Develop a pre-hospital Electronic Patient Care Record and develop interoperability between it and other EHRs
- Create a statewide Patient Registry focused on trauma, stroke, STEMI and burn
- Determine variation across communities in mortality and morbidity to support training efforts
- Encourage the development of appropriate health resources for Louisiana

Highlights

Promising Practices:

- Education for ambulance responders on HIT and specific software
- Successful in collaboration efforts
- Individual site visits allowed network leadership to address proprietary issues in a private setting

Lessons Learned:

- Numbers of volunteer fire department members has proven to be a challenge

- Privacy and security basics including policies and technology
- Insurance (cyber-liability) is a major expense to the network
- Readiness and expertise levels vary among network members
- Providing assets, such as hardware and software, at no charge to providers impacts their commitment to feel less at risk for loss

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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LOUISIANA

North Louisiana Regional Alliance (NLRA)

Hospital Service District #1-A of the Parish of Richland

Network Description

The network describes themselves as a vertical network located in Northeast Louisiana. They serve eight parishes that all are classified as HPSAs and MUAs. It has existed for over 15 years and was created to increase access to care and to secondarily ensure the financial survivability of the providers. The lead organization is a CAH and the network has a near 20 other members including RHCs, hospitals and many other.

Network Objectives

Mission: It is our mission to strengthen the interoperability of the health care system within the Northeast Louisiana region through the adoption of health information technology systems and the achievement of meaningful use of those systems by even our most rural providers.

Vision: To see all of NE LA communities served by the NE LA Regional HIT Network–Health Information Exchange resulting in the highest quality patient care for those who live, work or play in our communities.

Goals & Objectives:

To improve the quality, safety, and efficiency of health care in rural Northeast Louisiana through the use of certified electronic health record technology in a meaningful way.

Highlights

Promising Practices:

- Have done a lot of research on active data analytics
- Continue to develop and use each other as a knowledge resource
- Take time to discuss plans and actions

Lessons Learned:

- Sometimes you have to try more than once to accomplish your goal
- Every member organization works at its own pace
- The pathway to the future is bumpy - but there is always and opportunity

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would not continue network-sponsored HIT training but would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

Contact

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MINNESOTA

Red River Valley Technology Expansion Project

Mahnomen Health Center

Network Description

The network has a target population of individuals in a three-county area near the western region of Red River Valley in Minnesota. The lead organization is a health center located in Mahnomen, MN, and other members include a CAH, RHC and other. All of the members provide care in HPSAs and MUAs. The network was formed to improve population health status through MU tools.

Network Objectives

Mission: The Red River Valley Technology Expansion Project will strive to meet meaningful use guidelines in pursuit of improving population health of the region it serves.

Vision: To improve health outcomes in the region through effective use of health information technology.

Goals & Objectives: To build an EHR capable of meeting meaningful use requirements and ultimately improving the quality of healthcare services delivered to patients in the service area.

Highlights

Promising Practices:

- Have had lots of creative work with EMS services including protocols, sharing information, and good models
- Been able to meet all grant goals and get an EHR implemented at each of their facilities

Lessons Learned:

- Standardizing quality metrics is useful
- Learning about patient safety has been very insightful
- Implementation was challenging, which allowed us to step back and focus on the problem
- Extra training rewards have been invaluable and unmeasurable of helping flow and preventing interruptions of the EHR process

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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MISSISSIPPI

Meaningful Connections in the Delta

Delta Health Alliance

Network Description

The network serves a targeted area of 17 rural counties in the Mississippi region, all of which are designated as MUAs. There are about 410,950 individuals in the region, with disproportionate rates of diabetes, infant mortality, teen births, obesity and high blood pressure, sometimes double the national averages. The lead organization is a non-profit alliance formed with regional universities, state agencies and other non-profits. Member types include CAH, hospital, RHC and other.

Network Objectives

Mission: The mission and purpose of Meaningful Connections is to improve the health of the men, women, and children who make the Mississippi Delta their home through increased adoption and utilization of EHR systems that meet meaningful use criteria and improve care coordination across providers. With funding support for this proposal, Meaningful Connections will support the United States' ongoing efforts to bolster the widespread adoption of meaningful EHR utilization and health information exchange, specifically in seventeen underserved, rural counties of the Mississippi Delta.

Vision: To change health care in the Mississippi Delta by improving access to health care and providing education for healthier lifestyles.

Goals & Objectives:

- Improving health care quality, safety, efficiency and reducing disparities
- Engaging patients and families in managing their health
- Enhancing care coordination between rural and urban providers
- Improving population and public health
- Ensuring adequate privacy and security of health information
- Supporting the sustainability of rural healthcare providers

Highlights

Promising Practices:

- Sharing resources to help otherwise less fortunate facilities and networks
- Able to create solid work plans
- Possess very active project management skills

Lessons Learned:

- You can provide shared resources to facilities that would not otherwise have the ability or manpower to connect to the state HIE
- Leadership turnover does not mean network struggle
- A loose affiliation of health facilities can benefit from becoming more formal

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would not continue network-sponsored HIT training, but would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

Contact

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MISSOURI

HCC Rural HIT Network

Health Care Collaborative of Rural Missouri

Network Description

The network was formed under the Community Health Improvement Project model and is comprised of over 25 community organization of different member types. They describe themselves as a vertical rural health network serving the area of four counties in West Central Missouri including Lafayette, Carroll, Ray and Saline.

Network Objectives

Mission: To provide leadership in securing comprehensive services across the continuum of care.

Vision: The people of Lafayette County will share a mutual experience of a healthy environment, healthy lifestyles and a seamless network of health services.

Values:

- The many voices that speak to us regarding their health needs
- The rights and responsibility of good health
- A systems approach to quality, holistic health care
- Accessible, equitable and quality health care service
- A commitment to health education to improve mind, body and spirit
- The promotion of personal and organization health care achievements
- Collaborations with those who share our values and goals
- A pursuit of constructive change and innovation

Highlights

Promising Practices:

- Dedicated to health of the community and has proven success in the network
- An exemplary model of how rural health networks can operate and be successful
- Developing sustainable products and projects from membership with grant monies

Lessons Learned:

- Collaboration and partnerships are a key success factor
- You can still be financially viable even where you're fast-growing
- Strategic planning is an ongoing process that requires dedication to the purpose

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training, but would not continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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MISSOURI

Project Infocare Network

Citizens Memorial Hospital District

Network Description

This network is located in southwest Missouri and serves a five-county area. It is comprised of nine members that includes: a rural hospital, a CAH, a rural cancer center, a RHC, an OB/GYN specialty clinic and four eye care professional offices. These members are not affiliated under a larger system together.

Network Objectives

Vision: To provide high quality, safe, secure, efficient and coordinated healthcare to empowered rural residents through the support of adoption of HIT.

Purpose: The Project Infocare Network will provide targeted support to members to assist them in the implementation and MU of EHR systems. The network will facilitate the implementation of interoperability and host a community hub that will allow members to utilize one set of interfaces and interoperability to connect to all partners and to external HIEs.

Goals:

- Expand the scope of the Project Infocare EMR integration, so that they could increase collaboration of members through the interface
- Improve health care quality, safety, efficiency and reducing disparities
- Engage patients and families in managing their health
- Enhance care coordination and improve population and public health
- Ensure adequate privacy and security of health information

Highlights

Promising Practices:

- Improving customer engagement, awareness and self-involvement by concentrating their efforts
- Effective problem solving and project management
- Attesting to MU Stage 2 and continued to be committed to HIT objectives

Lessons Learned:

- MU can get very technical and difficult, but if you stay dedicated to it then you will be able to find the answers

- Different providers will need different tools to help them with attestation

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

Contact

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MONTANA

Monida Healthcare Network

Barrett Hospital & Healthcare

Network Description

The network is a non-profit physician-hospital organization with headquarters in Missoula, Montana. They describe themselves as a vertical network that is made up of six CAHs and their related clinics, a main tertiary hospital, home health agencies, university and other. The areas that the network serve are designated as HPSAs and MUAs, and is located in Western Montana.

Network Objectives

Mission: Successfully navigate the complex world of healthcare, building collaborative relationships between providers and hospitals, and pursuing shared strategic programs and services.

Vision: As a leading member-driven organization, Monida Healthcare Network will engage its hospitals and providers to implement processes and programs that improve our communities' population health, control costs and improve healthcare quality.

Goals & Values:

- Provide credible, fair and well-researched information as an essential service to our members
- Be a knowledgeable and trusted resource that works at the forefront of relevant issues
- Foster an environment that encourages staff to work together
- Encourage staff to pursue creative solutions and new ideas within the framework of business sustainability
- Nurture and develop effective leaders
- Have honesty and integrity in all business interactions and communication
- Respond respectfully and in a timely manner to members and clients
- Assess member's needs and apply resources that benefit our members
- Strive for excellence of service in order to ensure member and client satisfaction
- Focus on consistent and effective outreach to members and clients
- Work together internally and externally to achieve common goals

Highlights

Promising Practices:

- Able to balance member needs with having ways to share services and technology
- Development of new care coordination service based on member needs

Lessons Learned:

- Involve the clinical people in making key decisions - not just IT staff
- Offer more than one product to meet the needs of a broad network
- Make sure product is viable for inpatient and ambulatory and be willing to compromise

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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MONTANA

Northcentral Montana Health Information Technology Alliance (NMHITA)

Liberty County Hospital and Nursing Home, Inc.

Network Description

The lead organization is located in Chester, Montana. The overall service area is in 14 counties in the North central region of Montana, and it covers an area larger than the combined size of Vermont, Connecticut, Delaware and Rhode Island. However, the density is only about 6.6 people per square mile. It is comprised of 15 member organizations with member types including CAH, hospital, CHC and other.

Network Objectives

Mission: To improve health and healthcare for our rural and frontier member communities through the use of information and technology.

Vision: NMHITA will be a highly collaborative network of healthcare providers who, through the use of information and technology, empower individuals and improve the health of our populations.

Goals & Objectives: Advancing HIT infrastructure and equipment in each facility supported by a shared server, and developing and taking advantage of financial, clinical and operational economies of scale through network dynamics and synergies.

Highlights

Promising Practices:

- Experienced network leadership and Board
- Uses diverse views of members to come up with balanced solutions

Lessons Learned:

- The fear of losing autonomy of their HIT systems overshadowed the huge advantages clinically and financially of all of our member CAHs going on the same platform
- Not all of our CAHs were able to access much in terms of incentive monies and as such were less interested in getting to MU
- The funding that the grant provided was extremely helpful, but additional funds are still needed for systems/hardware/software

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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NEBRASKA

Panhandle HIT Network Development

Panhandle Mental Health Center

Network Description

The network is a behavioral health network in Nebraska. The lead organizations is located in Scottsbluff, Nebraska, and the service area for the network is in 11 counties in the western panhandle of Nebraska. All of the counties are designated as HPSAs in psychiatry and mental health, and two are MUAs.

Network Objectives

Mission: To promote quality care through efficient, secure, and confidential handling of data and patient information in order to provide seamless integrated patient care and access from multiple locations.

Vision: The primary focus is the development and implementation of a behavioral health integrated information and data management system.

Goals & Objectives:

- Workflow changes to improve clinical performance and outcomes
- Achievement of economy of scale and cost efficiencies of project management functions including vendor oversight, shared staffing, training, and purchasing
- Enhance the continuum of care in rural western Nebraska communities
- Adoption of certified EMR technology and demonstrate Meaningful Use of this Technology

Highlights

Promising Practices:

- Working hard toward grant goals even without eligible MU sites
- Have continue to persevere even through difficult leadership turnover

Lessons Learned:

- Do research before a product is chosen for best fit of services provided
- It's important that upper management is involved
- Preparations such as workflows, customized training manuals and staff training are highly recommended

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would not continue network-sponsored HIT training but would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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NEVADA

Nevada Rural Hospital Partners

Battle Mountain General Hospital

Network Description

The network is located in rural and frontier Nevada across a geographic area of 95,000 square miles, with an average population density of 2.95 persons per square mile. However, they serve over 300,000 frontier Nevadans. The network is comprised of nine hospitals that identify as CAH and hospital. Some also run RHCs.

Network Objectives

Mission: To improve the viability of member hospitals through shared health information technology resources.

Vision: The network is focused on helping rural health networks expand their adoption of HIT and EHR with the goal of helping each of the providers in the network meet Stage 1 Meaningful Use standards of EHR adoption laid out in the HITECH Act and subsequent rulemaking by HHS that established standards for qualifying for the Centers for Medicare & Medicaid Services' incentive payments under Meaningful Use of HIT.

Goals & Objectives: To support adoption and development of Electronic Health Information in all nine facilities and to expand the Health Information Infrastructure to support EHR and other Health Information Technology in all member hospitals.

Highlights

Promising Practices:

- EHR Strategy Workgroup meetings have been helpful in proactive brainstorming of outsourcing efforts
- Have robust services for membership
- Play a role in state level rural health advocacy

Lessons Learned:

- Changing financial systems as part of an EHR conversions has stopped cash flows for a period of weeks or months during the transition period and face running two systems at once
- New systems get the most focus even when the old ones are still loosely in place

- Members are constantly struggling to hire HIT staff, which leaves the burden on the CIO for training and advisement

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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NEW YORK

North Country Health Information Partnership (N-CHIP)

Fort Drum Regional Health Planning Organization

Network Description

The area this network serves is made up of two and a half counties in Northern New York and contains a population around 162,000 people. They are a larger network that identifies as a not-for-profit entity with member types such as: AHEC, CAH, FQHC, private practice and other. The area they serve is designated as a low-income primary care HPSA and has poverty and uninsured rates significantly higher than the rest of the state. Nearly 70% of their payments are government insured by Medicare, Medicaid and TRICARE.

Network Objectives

Mission: Through collaborative efforts, plan and evaluate to ensure quality healthcare services are provided to meet the needs of the rural civilian and military residents of the Fort Drum region by enhancing our response to the growth of the military community while building a strong North Country health care system. To accomplish this we will utilize available, and develop necessary, resources working jointly and cooperatively.

Vision: Transform our current healthcare delivery system into a healthcare delivery model that provides high-quality cost-effective care with maximum efficiency.

Goals:

- Provide technical assistance to assist rural high-risk practices to achieve MU
- Develop a plan to address and support the healthcare needs of the community
- Foster the collection and exchange of information to promote health through coordinated area-wide health services programs
- Improve clinical performance and outcomes for diabetes and congestive heart failure
- Build sustainability agreements and models to ensure financial stability.

Highlights

Promising Practices:

- Very proactive collaborative business model
- Strategies for developing meaningful network products and services
- Effective at getting their work done with extremely capable staff

- Creating HIT classes through local community college to develop a HIT workforce source

Lessons Learned:

- Involve providers early and often to ensure the clinical value remains paramount
- The importance of communicating HIT necessity to providers
- One must remain accountable while also keeping others accountable

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would not continue network-sponsored HIT training and would not continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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NEW YORK

Regional Health Information Technology Integrated Network Project

Mary Imogene Bassett Hospital

Network Description

The network is part of a vertically-integrated health care system with member types that include hospital, RHC, CHC and other. There are four members in the network that serve a multi-county rural area in central New York. The main services provided are outpatient primary and specialty care, community and tertiary-level inpatient care, and long term residential and in-home care.

Network Objectives

Mission: Promote and facilitate the adoption and use of complete, functioning and interoperable electronic health records (EHRs), certified for Meaningful Use by the Office of the National Coordinator, among participating organizations so as to advance health care quality, safety, efficiency and continuity for the regional, rural population.

Vision: Our Future as:

- A trusted and valued provider of HIT and EHR expertise for Network partners
- A shared Chief Information Officer for Network's health care provider organizations
- A financially sustainable, cost-effective and cost-beneficial service for our stakeholders, achieving financial self-sufficiency, providing economies of scale, and optimizing use of limited capital resources
- A cornerstone supporting continuous quality improvement in health care services by achieving continuous quality improvement in the quality, timeliness and integrity of HIT and EHRs
- A national leader in providing HIT support to rural health networks

Goals & Objectives: To achieve continuous improvement in the quality, safety and efficiency of health care provided to their regional population, along with a history of organizational collaboration to facilitate achievement of these shared goals.

Highlights

Promising Practices:

- Have been on target with grant goals and EHR implementations

- Have an effective project manager with IT and HIE experience

Lessons Learned:

- More thorough scope planning for specific projects was initially needed with representation from all participants affected. It came to light that original planning did not necessarily include key participants that could have provided better insight and scope clarification which would have save a lot of time in the overall project schedule.
- More thorough scope planning for the overall grant initiatives would have brought to light certain risks and clarified assumptions of the technical solutions chosen to meet the grant initiatives

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training but would not continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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NORTH DAKOTA

Nortek Northland Healthcare Alliance

Jacobson Memorial Hospital Care Center

Network Description

The network area serve approximately one-fifth of North Dakota, which encompasses eight counties in North Dakota and one in South Dakota. The population of that area is about 89,468 and some of the area is designated as a HPSA and MUA. There are 12 members in the network with member types that include: hospital, RHC and other.

Network Objectives

Mission: To build the capacity in the network and among the individual facilities and organizations to facilitate the exchange of health information between health care providers, health plans and other participants to enhance health care delivery and improve the efficiency and quality of the health care delivered in the region. NHIP is a project that is a subset of Nortek and will be able to have the advantage of expertise of all of the members of Nortek. The focus of the grant project will be to strengthen and assist the weaker members of the Nortek network to progress in their work to get to “Meaningful Use.”

Vision: The Vision of Nortek and the NHIP project is “to have healthcare delivered at the right time at the right place with the right information.” The Nortek project is designed to implement a model of community healthcare delivery based on integration of interdisciplinary teams using a Pathway model to guide the direction of services in a coordinated collaborative network of health care providers. Specifically, this initiative will improve the health care delivery system available to residents in North Dakota by strengthening the transfer of information among providers while reducing health costs by through the facilitation of sharing the IT successes and capabilities of the urban facilities/providers with their counterparts in rural areas and transferring valuable models built around care coordination and case management with real time access to all needed information for all users in the system.

Goals & Objectives: Specifically, Nortek will focus on providing guidance, assistance, and resources (both technical and financial) to facilitate the exchange of patient-centric information at multiple levels: inter-organizational, intra-organizational within and across this geographic medical

service area and providing linkages with the state HIE exchange and eventually across all boundaries. Nortek will assist each provider to meet the qualifications of “Meaningful Use” and will work to insure that each entity is eligible for the maximum level of incentive payment and is able to deliver a higher quality of care using better information at the right time.

Highlights

Promising Practices:

- Providing connectivity to EHRs
- Doing more and more with their services and continuing to grow
- Having a long-established rural hospital network in the state

Lessons Learned:

- It’s extremely important to communicate, and do so over and over
- Sometimes progress is incremental and slow, but changes do come with persistence and demonstrating value
- Some members have been slower to adopt than others

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training but would not continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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NORTHERN MARIANA ISLANDS

Commonwealth of the Northern Mariana Islands (CNMI) Health Information Technology

Commonwealth of the Northern Mariana Islands (CNMI)

Network Description

The network is located on the Northern Mariana Islands, specifically on the island of Saipan, which is the largest inhabited island with 90% of the population. Member types include CHC, hospital and private practice. There are four members and it is a unique network in terms of its geography. It is also located in a designated HPSA.

Network Objectives

Mission: To improve the quality, safety, efficiency and reduce disparities of health care in the Commonwealth of the Northern Mariana Islands through a shared, secure and robust public and private Territory-wide Health Information Technology (HIT) / Electronic Health Records (EHR) Network and Health Information Exchange that is sustained through strong collaborative partnerships among HIT stakeholders. To advance local HIT workforce capacity, services, applications and policies in CNMI.

Vision: To enjoy the highest quality health system, continuity of care and quality of life consistent with the aspirations of our people, and in harmony with our culture and environment.

Goals & Objectives: To work collaboratively to improve coordination and continuity of care through efficient and effective use of EHRs and HITs.

Highlights

Promising Practices:

- Developing partnerships and worked to leverage resources with partner organizations
- Focus on partners, patient, and community health
- Using various technology methods to communicate and deliver health across distances

Lessons Learned:

- The tangible benefits resulting from our concerted efforts with public and private partners to improve healthcare by implementing EHRs is gratifying to

know we are making a positive change in the community and establishing a blueprint for other pacific jurisdictions to follow

- Working in a severely resource constraint environment has taught us not to be complacent. Networks must continually assess and refine its organizational composition, process, procedures, finances, and HIT infrastructure to remain sustainable given the rapid evolvement of rules and regulations governing healthcare.
- Never undervalue the importance of communication. Ensure lines of communications are clearly delineated and established with stakeholders upfront. Effective communication will promote buy-in and help achieve project goals and objectives.

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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OKLAHOMA

Southeast Oklahoma Rural Health Network

Little Dixie Community Action Agency

NETWORK DESCRIPTION

The network has been in operation since 2008 and serves three rural Oklahoma counties which are the poorest in the state. According to their state's Primary Care Association, 100% of the population in the area is underserved. The land area is also over twice the size of Delaware and is all designated as a HPSA and MUA. It is a vertically modeled network with two CHCs, a rural hospital, and another social service organization.

Network Objectives

Mission: To work collaboratively with healthcare and community organizations to improve the health of rural Oklahomans.

Vision: Our vision is to assist healthcare and community organization in providing quality care to the patients they serve. We do this by providing guidance, leadership and technical assistance.

Goals & Objectives: To enhance health care quality, safety, and efficiency through the promotion of health information technology and records management to improve overall patient care. Objectives are to ensure electronic medical records access is uninterrupted and running efficiently, ensure accuracy of patient data and medical records, build network/member sustainability and further develop SORHN.

Highlights

Promising Practices:

- Working with each member individually to make sure they have the training needed for HIT and known of opportunities for them to make things easier
- Working on this consistently to make things second nature rather than a burden
- Acquired successful HR compliance software and support for FQHCs

Lessons Learned:

- It's important to keep members in the loop
- Be sure the board wears their network hats during meetings
- It takes patience and persistence to develop a sustainable network

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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OREGON

Southwest Oregon Health Information Collaborative

Mid Rogue Foundation

Network Description

The network is located in Southwest rural Oregon and is led by a non-profit community service organization. There are four participating members in the network that include member types such as: hospital, RHC, health department, and private practice.

Network Objectives

Mission/Vision: Our vision of a Health Information Exchange Network is built on a solid foundation of health information exchange that provides safe and secure patient and provider access to personal and population health information that will serve to improve the health and quality of life of the citizens of Josephine and Curry Counties while reducing the overall cost of care.

Goals & Objectives:

- Establish a strategic plan for implementing a HIT network
- Expand adoption of electronic medical record systems, particularly among primary care/medical home providers
- Assist EMR users with compliance with MU
- Collaborate with the Oregon Health Information Technology Oversight Council to expand broadband transmission infrastructure to our rural service area in support of HIE

Highlights

Promising Practices:

- Members have proven to be engaged and committed
- The mission of the organization was continually aligned with the goals of the grant program

Lessons Learned:

- Financial output from providers is always a concern
- Reporting requirements are becoming overwhelming for providers

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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PENNSYLVANIA

Pennsylvania Mountains Healthcare Resource Development Network (PMHRD)

Pennsylvania Mountains Healthcare Resource Develop

Network Description

The network serves a geographic region in central Pennsylvania and Southern New York comprised of more than 24 rural counties. Much of the regions qualifies for both HPSA and MUA. The network is comprised of twenty hospitals, but the project was focused on a particularly two to three of them.

Network Objectives

Mission: To promote the health of the community and reduce the burden on government by facilitating the exchange of electronic health information among hospitals, physicians and others in the health care system. PMHRD seeks to do this by:

- Overseeing the creation and maintenance of a fiber network that will be used for the secure exchange of electronic health information among hospitals, physicians and others in the health care system in Pennsylvania.
- Overseeing the creation and operation of programs involving the delivery of health services, and the associated exchange of electronic health information, via telemedicine using that fiber network.
- Engaging in various other activities that support these purposes. Also, through PMHRD, the PMHA member hospitals and other Pennsylvania hospitals can collaboratively take on projects and seek grant funding as a means of financing their initiatives related to the exchange of electronic health information.

Highlights

Promising Practices:

- High functioning with strong products and services
- Focused toward sustainability and value creation
- Experienced shared savings and benefits from sharing resources and growing

Lessons Learned:

- Set clear expectations and deliverables and document in written agreement
- Establish written operating agreements and Service Level Agreements

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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SOUTH CAROLINA

Tri-County Care Connect Network

Regional Medical Center

Network Description

The network is a partnership of five health care and community partners that serve the rural, ethnically diverse and low-income counties of Bamberg, Orangeburg and Calhoun in South Carolina. The member types in the network include FQHC, hospital, RHC and other. The three counties in the service area are designated as HPSAs and MUAs.

Network Objectives

Mission: To improve access to quality health care services for the medically underserve population in Orangeburg, Calhoun and Bamberg Counties in a sustainable, stream-lined and cost-effective manner.

Vision: The long-term vision is to enhance the overall health and reduce the disparities among the participating counties.

Goals & Objectives:

- Provide education, support healthy lifestyles and establish successful interventions to improve prevention efforts.
- Provide improved coordination of care through increased availability and use of HIT-enhances coordinated care management.

Highlights

Promising Practices:

- Much work focused on quality improvement, disease control and prevention
- The network developed, refined and implemented clinical protocols for the treatment of asthma, Congestive Heart Failure and Diabetes Mellitus, and hopes to collect and analyze patient data as it relates to health outcomes
- Expanding network to include other public health and educational entities in order to share lessons learned and best practices to address health needs of the community

Lessons Learned:

- The Network Director needs to be a "go getter"
- Expectations of each network member need to be defined up front
- Finding a sustaining funding source is difficult

- It is important to be transparent, responsive and available

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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SOUTH CAROLINA

Upper Midlands Rural Health Network

Fairfield Memorial Hospital

Network Description

The lead organization of the network is located in Fairfield County, which is one of the most impoverished, rural counties in South Carolina. There is a higher minority population and 22% of the resident lives below the poverty level. The network also serves in Chester County. Member types include two hospitals, three FQHC's, RHC and a variety of others.

Network Objectives

Mission: To improve health in the Upper midlands region through collaboration of a diverse group focused on access to care, health promotion and education.

Vision & Objectives:

- To strengthen the network and its effectiveness in improving the system of care in the network region
- To strengthen health services and retain patients in the network region
- To improve health status, disease management and appropriate use of service for network residents who are diabetics or at risk for developing diabetes.

Highlights

Promising Practices:

- The network has maintained IT Director and Technician for the duration of the project

Lessons Learned:

- Things usually take more time than you anticipate
- Communication is always a key ingredient
- Be as inclusive as possible

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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SOUTH DAKOTA

Brookings Community Health Information Network

City of Brookings

Network Description

The network serves the Brookings County area, which houses a population of about 32,000 people through various small, rural towns. Over 10% of the population is 65 years or older, a third of the population lives with 200% of the FPL, and an estimated 16.8% of people are uninsured. The network is made up of a hospital and various long-term care facilities and a clinic. It is a small network with only four members.

Network Objectives

Mission: The network seeks to facilitate the selection, implementation and support of services and technologies that are best acquired or maintained by a centralized organization in order to provide the highest quality of health care to the Brookings area community. They are a membership organization focused on the expansion and improvement of health-related services for the benefit of local community members.

Vision: Using technology as a pivotal tool, all Network members will achieve patient care excellence by improving operational efficiencies, maximizing investments and sharing best practices to the benefit of the Brookings area community.

Goals:

- Be a community resource in the further implementation of health care related technologies
- Enable network members to provide a higher quality of health care for the Brookings area community through the leveraging of MU tools including clinical decision support tools, real-time shared data and provider alerts and monitoring of individual patient as well as population health indicators
- Share best practices in terms of technology, operational efficiencies and maximizing investments

Highlights

Promising Practices:

- Successful network approaches for improving consumer engagement
- Creative efforts to coordinate care and manage population health
- Proactive for the future about data sharing through HIE

Lessons Learned:

- Using staff to help implement HIT practices has taken away from work on additional projects, so some quality projects get put on hold to support the required project efforts
- It's difficult to find a pace at which to find a suitable technology/solution, acquire it and then implement it with limited IT resources

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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SOUTH DAKOTA

Prairie Health Information Technology Network (PHIT)

Horizon Health Care

Network Description

The network is comprised of three FQHCs in South Dakota. One is located in east central South Dakota and serves a ten-county rural and frontier areas. Another is located in north-west South Dakota and serves a five-county frontier area. The last is located in southeastern South Dakota and serves one rural county area. All areas are considered to be a HPSA and MUA.

Network Objectives

Mission: The mission of the network is to improve patient outcomes and the quality of care for the medically underserved, including the uninsured and underinsured patients of South Dakota through the meaningful use and adoption by both provider and patient of health information technology and the electronic health record.

Vision: The vision of the network is to enhance patient safety, improve the quality of healthcare delivery, and reduce healthcare costs through efficient methods of health information exchange among all healthcare stakeholders in South Dakota.

Goals & Objectives:

- Assist members in the adoption and meaningful use of Electronic Health Record systems to improve patient outcomes
- Develop a secure, robust and scalable HIT network infrastructure for PHIT Members

Highlights

Promising Practices:

- Partnerships with local university and HIT staff at each network organization has helped with recruiting IT staff
- Focused on providing HIT training and education to current network workforce
- Clear leadership and active participation has made this network driven and successful

Lessons Learned:

- It is critical to create a big, compelling vision that people want to work towards
- Effective communication is critical to success - we've worked hard to communicate often and set realistic expectations for our network members
- Networks are critical to the viability of rural health care providers

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training but would not continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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SOUTH DAKOTA

South Central South Dakota Community Access Network

Community Memorial Hospital

Network Description

This vertical network is comprised of three CAHs and their affiliated clinics in south central South Dakota. The lead organization is located in Burke, South Dakota. The target area includes residents from nine rural South Dakota counties who receive health care services by the network partners, including around 40,227 rural residents.

Network Objectives

Mission: To effectively implement electronic medical record software applications that provide shared access to health information across the continuum of care through a sustainable and ever growing health information technology network.

Vision: To expand health information technology (HIT) and electronic health record (EHR) adoption to improve access to quality, safe, and efficient health care in the region through shared access to computerized patient health information across hospital services and physician practices.

Goals & Objectives: Improve access to quality, safe and efficient health care for rural residents through shared access to computerized patient health information across hospital services and physician practices.

Highlights

Promising Practices:

- Very active in patient and community engagement including sharing tools and resources
- Used evaluation of the EMR to conduct optimization training to help correct workflows and provide every day efficiency tips
- Providing new staff with adequate IT training and offering proficiency training to providers

Lessons Learned:

- Strategic planning is a must
- The EMR makes all non EMR processes more complex

- Training takes time and money and can certainly be a challenge with constantly revolving staff

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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TEXAS

Health Information Network of S. Texas

Texas A&M University--Kingsville

Network Description

The network is a community partnership of public, private and non-profit organizations in South Texas. They have member types including CAH, AHEC, FQHC, RHC, private practice, social services organization and many others. They are committed to developing and applying health information technologies that aid in expanding access to quality health care and improving health outcomes for all people through the timely exchange of medical information.

Network Objectives

Mission: Create a community that promotes collaboration and fosters high quality and efficient health care delivery in South Texas by providing a secure platform for sharing health information.

Vision: South Texas is home to an electronically connected health care community working together to promote wellness and a higher quality of life for all.

Goals & Objectives:

- Implement electronic medical record (EMR) keeping in seven rural health clinics employing eight physicians and five mid-level practitioners
- Implement a regional health information exchange (HIE) which encompasses all of the Network members as well as other providers in the region
- Sustain the Network through effective governance, strategic business planning, network expansion, and evaluation and dissemination activities

Highlights

Promising Practices:

- Implementation of a HIE
- Using cloud based models to exchange information

Lessons Learned:

- Finding a pricing model that would be sustainable can be difficult to quantify
- You can remain successful, even in times of transition, if you remain focused

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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WASHINGTON

Critical Access Hospital Network's Rural HIT Project

Pend Oreille Public Hospital District No. 1

Network Description

This network serves rural communities in Eastern Washington. They describe themselves as a nonprofit, multi-county vertical network comprised of CAHs, hospitals, RHCs and two urban tertiary centers. They developed in 2002 within the guidance and fiscal assistance of ORHP under the Rural Network Grant Program.

Network Objectives

Mission: To enhance the quality of care and test an infrastructure designed to stabilize and strengthen the local rural health care delivery system.

Vision: A vertically integrated rural network in eastern Washington that supports coordinated care, expands access, and increases quality and cost effectiveness.

Goals:

- Implement the principles of care coordination among rural and urban settings and promote the exchange of health information to optimize quality health outcomes
- Enhance access to a structured (searchable), reliable and complete patient data for local/regional reporting purposes and statewide health care reform activities
- Deploy a regional central data repository to enable local/regional quality improvement activities and position CAHN for statewide healthcare reform opportunities
- Secure the long term HIT sustainability of the CAHN

Highlights

Promising Practices:

- Very connected statewide and on the leading edge of data analytics and population health
- Leveraging collaborative partners and programs to increase network value
- Successful data warehousing efforts and use of population management tools

Lessons Learned:

- Engage physicians and front office staff on a regular basis

- Be flexible when rolling out IT solutions, because they rarely go as originally planned
- Share findings with others to explore best practices and disseminate shamelessly

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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WASHINGTON

Western Washington Rural Health Care Collaborative (WWRHCC)

Western Washington Rural Health Care Collaborative

Network Description

The network is a compilation of ten public hospitals districts that are all CAH districts that serve rural areas of the coastal corridor of Western Washington. There are about 288,000 rural residents that the network serves, which include a large percentage of elderly residents, as well as some minority populations.

Network Objectives

Mission: To improve the health care delivery systems of our rural communities by working collaboratively to address our unique issues.

Vision: To provide quality care to all those in need by sharing costs and knowledge through collaboration.

Goals & Objectives:

- Following HRSA's recommended framework for performance improvement: STEEPE (Safe, Timely, Effective, Efficient, Patient Centered, Equitable)
- Establishing specific indicators by which we will measure, track and report on our progress
- Prioritizing needs and opportunities based upon their impact on system sustainability
- Focusing on common rather than on individual needs
- Building first from internal skills and capacities
- Limiting membership to CAH's to improve focus and coherence
- Developing partnerships appropriate to specific activities (non-members may participate in specific collaborative activities)
- Sharing learning and Quality Improvement activities
- Requiring every member to be an active participant in collaborative activities

Highlights

Promising Practices:

- Group purchasing rates on security analysis
- Sharing IT expertise of hospital staff
- Good collaboration and proactive growing efforts
- Worked to meet objectives with effective project management

Lessons Learned:

- It's important to get network members to work together instead of each doing their own thing and then report outcomes
- The connectivity between the pharmacy and health system is very valuable

Sustainability Plans

This network plans to sustain after grant funding. They reported that they would continue network-sponsored HIT training and would continue to support the maintenance of the EHR system that was previously supported by the grant funding.

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