FEDERAL TELEMEDICINE Update

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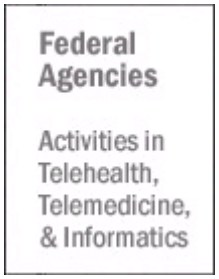
Two new reports on telemedicine activities:



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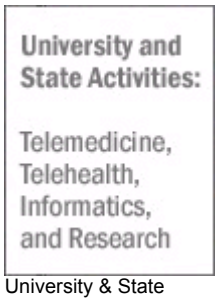

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March 15, 2004

Capitol Hill News

The Steering Committee on Telehealth and Healthcare Informatics opened this year's kick-off session on Capitol Hill with 5 speakers presenting their viewpoints on the challenges facing today's health information technology field.

Paul Fontelo, MD, High Performance and Communications Office, NLM, highlighted the information sources that collect organize and disseminate published biomedical information such as MEDLINE PLUS, a site for consumer health information that includes 600 health topics.

NLM has a history of awards made since the 90's that relate to telemedicine and the effort is still ongoing. The Scaleable Information Infrastructure Award Program that makes use of fast and wireless networks recently made awards in 2003. For example, one award went to Brigham and Women's Hospital to enable the hospital to track and monitor patients at the emergency site and to continue tracking the patient through transport, triage, and stabilization.

Janet Marchibroda, CEO, eHealth Initiative, talked about the problems the industry faces with the looming healthcare crisis in terms of changing demographics, healthcare costs, malpractice costs, numbers of uninsured people, public health threats, along with all the quality and safety issues that abound.

Vital data sits in paper based records that can neither be accessed easily nor combined into an integrated form to

present a clear and complete picture of the patient's care. Paper hospital records are unavailable when needed about one-third of the time and physicians spend an estimated 20-30% of their time searching for and organizing information.

It is evident that there are barriers to the adoption of health IT, however the momentum is growing around this issue resulting from leadership and collaboration across every segment of the private sector as well as government. The focus has shifted from "whether we should" to "how will we do this" and the leadership has to play an important part in making this happen.

Randy Thomas, FHIMSS, Vice President Advisory Services Healthlink Inc. & Chair HIMSS Advocacy Committee said some of the biggest barriers in the field are costs, changes to the organization, productivity loss, and lack of standardization. Financial systems were developed with the eventual intent to be able to use and adapt these systems for other uses, however, systems that have now been developed do not always work well with older systems. In other words, the systems do not talk to each other. Vendors are moving toward adding to the technology already in place which means that standards are absolutely essential.

Kim Slocum, Director, Strategic Planning and Business Development, AstraZeneca L.P. gave the audience some thoughts on future trends. He pointed out that 57,000 people die each year because they don't get needed care. They have insurance, go to doctors, but they die because they simply aren't treated correctly.

He told the audience about the Bridges to Excellence program that physicians can participate in through the Diabetes Care Link. Physicians can apply for certification under the Diabetes Physician Recognition Program, a joint effort of the American Diabetes Association and NCQA.

For example, each diabetic patient cared for by a physician or participating physicians in a group and covered by a participating employer, the physician will receive a $100 annual bonus. Depending on the number of diabetic patients treated, these bonus payments may amount to thousands of dollars per year.

Peter Basch MD., Medical Director, MedStar e-Health Initiative said the 50% of doctors carry PDAs. Some use technologies that are possible such as e-prescribing to interface with the pharmacy, and e-care to provide web visits or consults.

The future means that the genetic revolution will produce enormous amounts of cellular and molecular data. We will need to use all the advances in health IT in genomics in order to handle all the data.

Honorary Steering Committee Co Chairs are Senators Kent Conrad (D-ND), Mike Crapo (R-ID), and Representatives Charlie Norwood (R-GA) and Rick Boucher (D-VA)

For more information on the Capitol Hill series contact Neal Neuberger, Health Tech Strategies at (703) 790-4933 or John Scott, Center for Public Service Communications at (703) 536 5642. The March 31, 2004 program will focus on Public/Private Partnerships.

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William Winkenwerder Jr. MD. MBA, Assistant Secretary of Defense for Health Affairs and Lt. General James Peake MD, Surgeon General, U.S. Army Commander, U.S Medical Command, presented testimony to the House Armed Services Committee.

The testimony discussed military health assessments and how these assessments are achieved in pre and post deployment. For instance, the Defense Medical Surveillance System (DMSS) provides periodic reports, and retains copies along with maintaining centralized databases for deployment health assessments. The Army Medical Surveillance Activity (AMSA) provides weekly reports on post deployment health assessments and monthly reports on pre and post deployment health assessments.

The first stage of the computerized medical record system for one-way transfer of health care data from DOD to VA has been implemented. Currently DOD sends VA laboratory results, outpatient military treatment facility pharmacy data, radiology results, discharge summaries, demographic information and admission, disposition and transfer information, allergy information and consult results.

Full real time exchange of DOD and VA health record data is expected by the end of 2005. In addition the VA will have access to DEERS in real time by the end of 2005.

USDA Announces Applications for $15 Million in Grants for the Distance Learning and Telemedicine Program

USDA announced that the agency is making $325 million in loans and grants available to rural communities to strengthen distance learning and telemedicine programs. Since the beginning of the Bush Administration, over $100 million has been invested in local distance learning and telemedicine programs, with 1,384 rural educational facilities expanding their access to modern telecommunications technology. Funding has gone to 658 health care institutions to develop technologies needed to improve local medical care.

Applications for $15 million in grants now available must be submitted by 4/30/2004. However, the applications for the grant/loan combinations and loans can be submitted though out the fiscal year and will be processed on a first come, first served basis.

For information go to http://usda.gov/rus/telecom/dlt/dlt.htm or email david.noll@usda.gov or joan.keiser@usda.gov

University of Pittsburgh will use Telemedicine to Treat Diabetes

The Pittsburgh Diabetes Institute at UPMC received a $10 million appropriation from Congress to help the Institute improve access to care for people with diabetes in western Pennsylvania. The emphasis will be on prevention through the promotion of healthier lifestyles in high risk, hard to reach populations, and in rural communities.

Linda Siminerio, Ph.D., Executive Director of the Institute and assistant professor of medicine, Division of Endocrinology and Metabolism at the School of Medicine said "Telemedicine will be used to facilitate access and reach. Self-management education will be incorporated into each of the programs designed to incorporate tracking, monitoring, and reporting of patient progress."

The interventions developed through this appropriation will subsequently serve as a model for diabetes treatment for the Air Force. The Air Force Medical Service will continue partnering with UPMC and eventually expects that this new initiative will improve the capability to provide care to 130,00 beneficiaries who have Type 2 diabetes.

For more information email raczkiewiczfa@upmc.edu or call (412) 784-5162

Institute of Medicine Held Workshop on the Future of Rural Health

The IOM's Committee on the Future of Rural Health Care held a workshop on 3/1/04 in Washington D.C. and invited experts to discuss how to sustain quality improvements in health care systems that are in rural settings. Discussion centered on how rural community health care systems can improve health care, information and communication technology, training deployment, payment policies, and quality monitoring and reporting.

David Kibbe M.D. M.B.A. Director, Center for Health Information Technology, American Academy of Family Physicians spoke at the workshop. He said "a large survey was done and it was found that family physicians are not opposed to using technology and that rural physicians use technology as much as physicians in urban centers." It has been found that:

- 80% of physicians in practices are connected to the internet
- 70% of physicians in family practices use PDAs
- 85% of practices use practice management systems for electronic billing.

The AAFP members are ready to transition to electronic offices as per a survey of over 5,500 family practitioners in 2003.

However, there are reasons for not using electronic health records that relate to costs, the work interruption/work flow, lack of standards, security and privacy issues, and the fact that systems are not always integrated. Other concerns are that software companies may go out of business.

AAFP's Center for Health Information Technology has signed "Principled Group Purchasing Agreements" with companies that produce software, hardware, and networking products. Through this close collaboration with the IT industry, the association is trying to help members acquire and use low cost standards based IT solutions. These companies have agreed to significantly reduce prices on products and services to AAFP members.

Other Center projects include:

- Continuity of Care Record is a project to develop a new XML document standard for a summary of personal health information that clinicians can send

when a patient is referred
- Open EHR Pilot Project Phase One is a small scale collaborative pilot project to study and promote the transition to paperless offices and the use of EHR in small and medium, sized family practices
- Doctors Office Quality Information technology to assist small to medium sized physician offices in migrating from paper base health records to EHR systems

For more information on AAFP's Center for Health Information Technology go to http://www.aafp.org. For more information on the Committee on the Future of Rural Health IOM contact Bina Russell (202) 334-1321 or go to http://www.iom.edu

DOD Patient Safety Program Begins Implementation Phase

The DOD Patient Safety Program has been in existence for 3 years. The Patient Safety Executive Council comprised of 3 Surgeon Generals, the President of USUHS, and the Director of AFIP, have approved the 2004 Strategic Plan for Patient Safety. The Plan is divided into 3 phases including the development phase, implementation phase, and the maturation phase.

The development phase took place last year and distributed automated tools to the field in the form of a Medication Error Reporting System (MEDmarx) and an analysis tool referred to as TAPROOT that requires mandatory monthly reporting of medical errors and near misses to the Patient Safety Center.

The implementation phase will occur during FY 04-05. This phase will pilot test the enterprise wide patient safety reporting system, establish electronic safety alerts that will originate at the Patient Safety Center, and focus on health care team coordination training. Also, a Bar Code Point of Care Integrated Product Team has been formed to outline the requirements for establishing a seamless bar code system that will range from outpatient dispensing of medication to bedside inpatient medication administration.

In the maturation phase, the Patient Safety Center will be able to analyze data and see the trend for medical errors, near misses.

For more information email patientsafety@afip.osd.mil or call (301) 295-8115

New Report on the State of Mobile Computing Within the Healthcare Industry

The report "Healthcare Without Bounds: Trends in Mobile Computing" provides insights into the current state of mobile computing within the healthcare industry. The report published in November 2003, identifies the market drivers, trends, opportunities and challenges to using mobile computing devices and medical applications at the point of care.

Gregg Malkary, Managing Director, Spyglass Consulting, Menlo CA., said "the primary content for the report was derived from over 100 in-depth interviews performed at leading healthcare institutions. Interviews were conducted with practicing clinicians representing a broad range of medical specialties, individuals of all age groups with varying levels of technical competence."

The interviews were completed over a 5 month period starting in June 2003. The purpose of the interviews were to identify critical needs and requirements through conversations about medical practice inefficiencies, the usage of mobile devices and medical applications, and the opportunities for future mobile computing solutions.

Gregg Malkary has had over 20 years experience in the high technology industry working to help companies use IT for competitive advantage and helps companies to improve business performance, reduce costs, and streamline day-to-day business operations.

For more information on the report and cost, email gmalkary@spyglass-consulting.com, or call (650) 575-9682. For the web site go to http://www.spyglass-consulting.com

A Conference on Implementing Disease Management Strategies for the Military will be Held in Washington D.C.

DOD is one of the largest health care providers, and health care coverage is a rapidly growing component of the military budget. New healthcare support contracts have been awarded and will total $34.2 billion over the next 5 years.

The Institute for Defense and Government Advancement (IDGA) is presenting the conference on June 28-30, 2004 in

Washington D.C. Key industry decision-makers from all branches of the military, hospitals, and healthcare systems will be addressing topics in chronic disease management and how to provide care for all active duty personnel, retirees and their 8.9 million beneficiaries.

Attendees will be provided with in-depth information on the next generation methods for disease management along with the healthcare initiatives currently underway for FY 2004 and FY 2005. More details on the conference will be available in future newsletters.

A few of the confirmed speakers include Ellen Embrey, Deputy Assistant Secretary of Defense, Force Health Protection and Readiness, Office of the Assistant Secretary of Defense for Health Affairs, and Rosemary Nelson, AN, FHIMSS, Colonel USA, President and CEO MDM Strategies.

For more information contact Marc Mailbrunn, Conference Director IDGA at (212) 885-2747 or email marc.mailbrunn@idga.org

The editor of this newsletter is Carolyn Bloch. Bloch Consulting Group is not responsible for the information provided on other Web sites. If you have any comments or additions, please contact cb@cbloch.com