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## **Idaho hospitals work to computerize medical records**

Because of the promise of money, clipboards and medical files will finally join mercury thermometers as a thing of the past for many health care providers.

Beginning this year, hospitals and medical professionals can begin qualifying for Medicaid and Medicare incentives for computerizing patient records.

The incentive payments and associated deadlines for meeting Electronic Health Records requirements were approved last year when Congress and the Obama administration passed the Health Information Technology for Economic and Clinical Health Act.

Hospital associations complained that no facility could meet the requirements, so in July the requirements for the first stage were made easier.

The act provides incentive payments totaling \$27 billion over 10 years, or as much as \$44,000 through Medicare and \$63,750 through Medicaid per clinician.

Hospital payments vary but start at \$2 million under both Medicare and Medicaid. If they haven't started upgrading by 2015, hospitals will receive reduced Medicare reimbursement.

For the Medicaid incentive, hospitals must adopt, implement, upgrade, or demonstrate meaningful use of certified technology in their first year of participation and demonstrate "meaningful use" for up to five years. The last year to enroll to qualify is 2016.

Meaningful use requires that providers not only adopt a computer program; they must use it in such a way that it improves patient care. Brett Taylor, St. Luke's Magic Valley Medical Center information technology site leader, said that's one of the challenges. It's one thing to get the nuts, bolts and silicon of a computer system installed; it's another to overcome people's natural resistance to change.

Even so, most Idaho hospitals are on their way to achieving meaningful use. It doesn't hurt that two local hospitals are new. But getting different systems to talk to each other takes work.

North Canyon Medical Center in Gooding opened its doors last year. Hospital administration was able to buy a computer system for records in 2009 with \$2 million that was saved on construction. It took a little while to work out the kinks, IT Director Paul Castranova said, but the center went live in February with Cerner, an economical system that works well for smaller rural hospitals.

The Cerner system is also being used by Syringa Hospital in Grangeville and Saint Alphonsus Regional Medical Center in Boise. CFO Betty Watson said Syringa went through a two-year selection process. Cerner offered the best package, which the hospital bought for \$1.3 million. Syringa went live on Dec. 1.

Taylor said the Magic Valley Regional Medical Center and clinics were way out in front when they installed the Centricity records system a few years ago. St. Luke's has since bought the formerly county-owned hospital, and it has chosen EPIC for its electronic records but is just in the beginning stages of installation. Since Twin Falls physicians are used to Centricity and money has already been invested, they will be allowed to use it until 2015 then transition to EPIC.

But it's not just each hospital's system that needs to meet muster; they have to be able to communicate. That's where St. Luke's new Twin Falls hospital may play a larger role. One corner of the hospital's basement has been dedicated to a data center that now holds 20 percent of the hospital's servers. The rest will be moved this month.

Each is housed in state-of-the-art modules that cool each server individually rather than requiring officials to keep the entire data center cool.

"This is perhaps more advanced than Boise," Taylor said. "If we use virtualization, which allows you to run the equivalent of 10 servers on one server, it reduces space needs but increases heat. Cooling is the limiting factor."

Taylor said he has enough space to double the server capacity so St. Luke's Health System may run all its medical records through the Twin Falls data center. That means St. Luke's entire system will be linked but communicating with outside systems requires the help of the Idaho Health Data Exchange.

"The Health Exchange is creating a way for different systems to talk," said Health Exchange Executive Director LaDonna Larson. "That way, hospitals can choose the systems that work best for them."

Larson said the exchange began installing a hosting infrastructure in 2008 and participation is optional. But five hospitals are now connected to the exchange, including St. Luke's in Boise, Meridian and the Wood River Valley. Twin Falls has been delayed with the focus being on the new facility. Eventually, the exchange will connect with other states, with Utah scheduled first, Larson said.

Larson said that once all the hospitals and providers are connected, any doctor can access a patient's records from anywhere, which is helpful if people get hurt when they travel.

"Our goal is to make better information available at the point of care," Larson said.