

Electronic Health Records, CliniSync and the AMCNO

By Anthony E. Bacevice, Jr., MD, AMCNO Past President

Technology has been a part of medicine since the first time we used a stethoscope to listen to a patient's heart, rather than placing our ears on the chest. In more modern times, computers have become as important, if not more so, than the time-honored stethoscope. Faster, smaller and more powerful computers have become part of patient care, both in the office and at the bedside.

One of the most pervasive applications of computing technology has been the transformation of record-keeping from paper documentation to electronic documentation. With the prodding and help provided by the federal government, electronic health records (EHRs) have become parts of daily medical practice. The EHR helps to avoid the errors and vagaries associated with handwritten orders and notes. Also, a standardized format for stored data facilitates storage, retrieval and exchange of patient-specific data. "Big Data" analytics can be applied to patient populations, allowing for quality analysis of care models. Focused data analysis can be compared to evidence-based metrics to assess the quality of care delivery. Population data analysis from the EHR can improve epidemiologic analysis of health and disease trends.

One of the most important consequences of the EHR, however, is the ability to interconnect hospitals, laboratories, physicians and other providers for the purpose of exchanging data to support the care of the patient across multiple care sites and encounters. Interconnection is through the health information exchange (HIE), which provides both the hardware and software to enable communication among these entities. Wherever and whenever a patient encounters the healthcare environment, his or her information can be made available to those with a "need to know" to have all necessary information at hand for optimally efficient care delivery.

The AMCNO has been a partner in Ohio's transition to the electronic medical record as it has evolved. The Ohio Health Information Partnership (OHIP) was created to facilitate the adoption of electronic medical records in physician practices throughout Ohio. Initially, Regional Extension Centers were established to facilitate the transition to electronic medical records in physician practices, both large and small. Representing a large majority of Northeast Ohio physicians, AMCNO was involved in the local Regional Extension Center, providing advice and feedback from its physicians. As EHR connectivity evolved, OHIP

developed the HIE infrastructure under the name of CliniSync.

In 2012, OHIP invited AMCNO to provide a representative to its Clinical Advisory Council. This was an advisory group made up of representatives of the various entities that provided information to and extract information from the statewide health information exchange. The Clinical Advisory Council met by teleconference or in person six times per year for the purpose of discussing issues that were relevant as the HIE developed. With feedback from stakeholders, such as hospital systems, large physician practice systems and small physician groups represented by organizations such as AMCNO, the Clinical Advisory Council was able to provide advice to CliniSync as it developed operational policies that affect the day-to-day interaction of users of the interconnected electronic record. Issues such as patient privacy and patient consent as it applied to the HIE were instrumental in shaping how the final product was developed and deployed.

As of January 2017, CliniSync has more than 3,200 active users, including 330 healthcare organizations. At this time, 127 hospitals in Ohio are interconnected through the CliniSync HIE. AMCNO continues to be active in providing feedback from its board and its members to the Clinical Advisory Council. As innovations in EHR interconnectivity evolve, AMCNO is actively participating in policy formation and operational evaluation of Ohio's most pervasive HIE.

For more information about CliniSync and other aspects of EHRs and HIEs, please consult their website (www.clinisync.org). ■

Anthony E. Bacevice, Jr., MD, is Past-President of the AMCNO. He is Chief Medical Officer at University Hospitals Elyria Medical Center. Since 2012, he has represented AMCNO on the Clinical Advisory Council for CliniSync. He is a member of the Healthcare Information and Management Systems Society (or HIMSS), in addition to other medical societies. Dr. Bacevice will provide regular updates on the activities of the Clinical Advisory Council for AMCNO members in upcoming issues.

Register Now for the AMCNO/CMBA Medical Legal Summit: March 24-25, 2017

The 2017 Medical Legal Summit will be held March 24-25 at the Cleveland Metropolitan Bar Association (CMBA) Conference Center. This annual event is co-sponsored by the CMBA, the AMCNO, and the Academy of Medicine Education Foundation.

Keynote speaker **Gail Wilensky, PhD**, will present "Update on the Affordable Care Act and the Impact of Medicare Payment Reforms" on Friday, March 24.

Saturday, March 25, will feature three plenary sessions: "MACRA," "Addressing the Opioid Crisis in Ohio," and "Lawsuits: How to Survive, How to Avoid Them (a Medical/Legal Perspective)."

A breakout session will follow: "Medical Marijuana" or "Legal Issues in the Care of the 'Vulnerable' Patient."

This summit is intended to bring together physicians, attorneys, healthcare professionals and others who work in allied professions, for education, lively discussion and opportunities to socialize. The co-chairs of the event are **AMCNO President Dr. Robert Hobbs** and **Marlene Franklin, Esq.**, General Counsel, MetroHealth Medical Center.

Register now for the event—5.5 CME credits and 5.0 UH CRME credits are available.

See the Upcoming Events section on our website homepage, at www.amcno.org, for more information.