

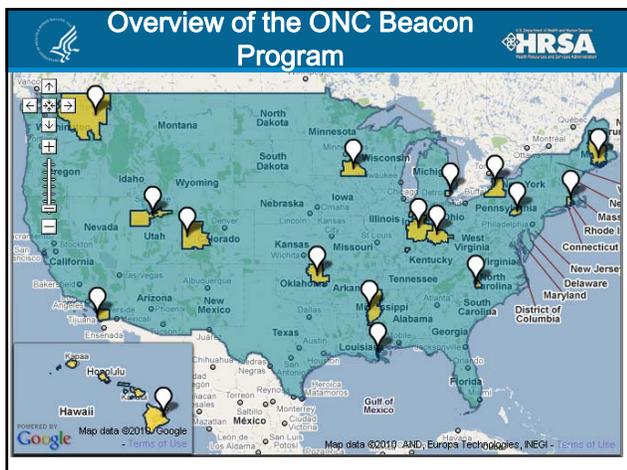
**HRSA Beacon Program to Support Health Centers to Optimally Use Heath IT to Advance Quality Improvement for Health Care Delivery**

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### HRSA Beacon Program Objectives

- Support health centers with:
  - Adoption of health information technology (health IT) to support long-term improvements in quality of care, health outcomes and cost efficiencies.
  - Improve individual health centers' capacity to share data and information within the Beacon Community

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### List of the ONC Beacon Locations

Lead Organization	Location
Community Services Council of Tulsa	Tulsa, Oklahoma
Delta Health Alliance	Stoneville, Mississippi
Eastern Maine Healthcare System	Brewer, Maine
Geisinger Clinic	Danville, Pennsylvania
Greater Cincinnati HealthBridge	Cincinnati, Ohio
HealthInsight	Salt Lake City, Utah
Indiana Health Information Exchange	Indianapolis, Indiana
Inland Northwest Health Services	Spokane, Washington
Louisiana Public Health Institute	New Orleans, Louisiana
Mayo Clinic College of Medicine	Rochester, Minnesota
The Regents of the University of California, San Diego	San Diego, California
Rhode Island Quality Institute	Providence, Rhode Island
Rocky Mountain Health Maintenance Organization	Grand Junction, Colorado
Southeastern Michigan Health Association	Detroit, Michigan
Southern Piedmont Community Care Plan	Concord, North Carolina
University of Hawaii at Hilo	Hilo, Hawaii
Western New York Clinical Information Exchange	Buffalo, New York

### Overview of the HRSA Beacon Program

- Purpose:** To enable existing health centers located in Beacon Communities to participate in community-wide health care improvement initiatives that include a strong information technology component.
- Eligibility:** Health Center Program grantees located within a Beacon Community Program service area as defined by counties and zip codes.
- Awards:** \$8.5 million to fund 85 health centers in 15 of the 17 Beacon Communities
- Project period:** 1 year

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### Application Requirements

- Grantee Applications required:**
  - Performance improvement goals
  - Key clinical and non-clinical interventions
  - LOS from geographic Beacon Community
  - Action plan with timelines
  - Privacy and security approach
  - Sustainability Approach
  - Budget Form (SF-424A)
- Project Reporting requirements:**
  - Semi-annual Progress Report in Mid April
  - Final Progress Report in Mid October

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### Methods

- Eligible applicants were sent the funding announcement with instructions on how to apply
- Reviewed applications
  - Completeness and comprehensiveness
  - Proposed activities
- Reviewed interim and final progress reports
- HRSA collaborated with ONC Beacon Program
- Tracked stakeholder requests
- Regional program calls with grantees were conducted

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### Summary of Results



- Awards were made to 85 health centers with 734 sites
- Award funds used to advance HRSA/BPHC quality goals:
  - Advance QI reporting -- 85%
  - Align with MU efforts -- 79%
  - Support PCMH recognition -- 78%
- Award funds supported new partnerships:
  - Beacon Communities -- 100%
  - RECs -- 54%
  - Other health centers (FQHCs) and hospitals tied at -- 49%
  - HCCNs -- 48%

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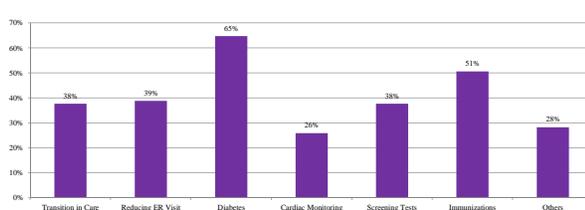
### Summary of Results



- Health centers participating in the grant were found to:
  - Have an 8% higher PCMH recognition levels as compared with the non-HRSA Beacon health centers. (31% to 23%)
  - Become more sophisticated health IT users, to better understand system interdependencies with others in the community, state and the nation.
  - Advance the HIE technically and organizationally
    - Focus on standardized data entry into the EHRs trainings;
    - Found innovative workforce solutions (e.g., volunteers, the promotora model).

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### Beacon Grantees with Clinical Interventions

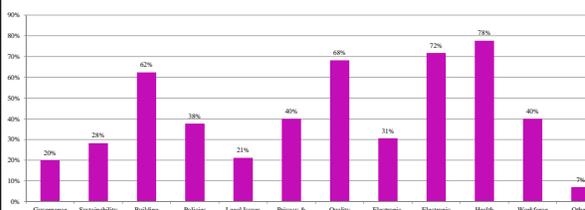



Intervention	Percentage
Transition in Care	38%
Reducing ER Visit	39%
Diabetes	65%
Cardiac Monitoring	26%
Screening Tests	38%
Immunizations	51%
Others	28%

**Notes:** Clinical interventions that did not fit in the first 6 clinical categories were captured in an "Others" section. Examples of the "Other" interventions are: monitoring anticoagulant medications for dental visits; tracking compatibility with the State immunization registry; developing medication refill policies, etc. Proportions may sum up to more than 100% due to multiple selections/interventions.

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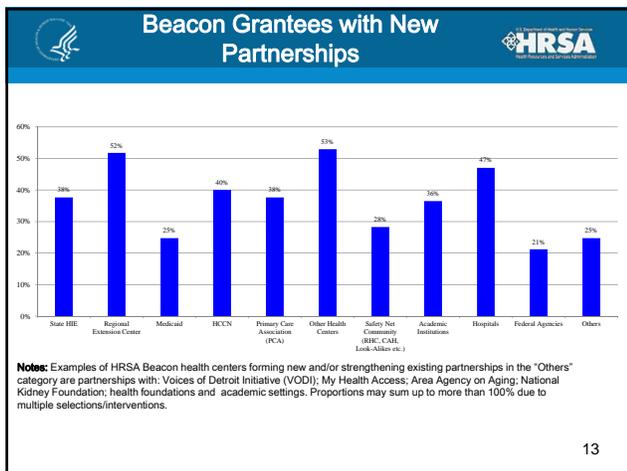
### Beacon Grantees with Non-Clinical Interventions

Intervention	Percentage
Governance	20%
Sustainability	28%
Building Technical Infrastructure	62%
Policies	38%
Legal Issues	21%
Privacy & Security	40%
Quality Improvement Reporting	68%
Electronic Health Record Acquisition	31%
Electronic Health Record Optimization	72%
Health Information Exchange	78%
Workforce	40%
Others	7%

**Notes:** Interventions that did not fit in the first 11 non-clinical categories were captured in an "Others" section. Examples of the "Other" non-clinical interventions are: patient portals, educational institutions etc. Proportions may sum up to more than 100% due to multiple selections/interventions.

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- ### Summary of HIE Activities
- Upgraded IT infrastructure for data exchange
    - Health centers received support with EHR interfaces to connect with HIEs (interfaces being developed)
  - Advanced HIE policies and business rules
    - Health Information Exchange Participation agreements
    - Business Associate Agreement
  - Advanced data exchanges
    - Advance data sharing with state immunization registry
    - Receiving e-notifications for all admissions, discharges and transfers of care for patients enrolled in the HIE

- ### Limitations
- As grant funds were used for multiple interventions, it was not feasible to get quantifiable data on how much effort was allocated for each intervention
  - Data were self-reported
  - Grantee progress reports included work and/or partnerships that were not a direct result of this funding
  - The project period was 1 year-not enough time to fully gauge the award impact

- ### Conclusions
- Health centers are working hard toward modernization and transformation of health care delivery for the vulnerable and underserved populations they serve.
  - Health centers are dealing with cross-cutting issues that extend across multiple domains of quality improvement while needing to meet multiple competing demands in serving their populations.
  - Health centers could benefit from federal/HRSA support with tools (e.g., templates for system disaster recovery) and resources (e.g., create learning collaboratives) to let them resolve their own challenges.
  - This grant effort aligned with qualitative health science research and found multiple positive anecdotal feedback from grantees, like:
    - *"We have found the (HRSA) Beacon Grant to be extremely helpful in providing us the financial resources/opportunity to enhance our IT infrastructure, establish and provide clinical outcome measurement tools, receive work flow consulting assessments and recommendations, promote collaboration with others, help achieve PCMH Level III Certification, help attain MU attestation and most importantly help position us to implement work flow re-design that will have a positive impact on patient care. The final results of these efforts/interventions will be evident within 2013 measures".*
  - This grant program highlights the synergism that can arise when two federal agencies collaborate to support health data exchange.

 **Contact Information** 

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